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COUNTY BOROUGH OF WALLASEY



ANNUAL REPORT

of the

Medical Officer of Health

and

Principal

School Medical Officer

FOR THE YEAR

1960

HOWARD W. HALL, M.B., Ch.B., D.P.H.

*Medical Officer of Health, Administrative Tuberculosis Officer,
Principal School Medical Officer, etc.*

Including the Report of the

CHIEF PUBLIC HEALTH INSPECTOR

I.A. GILPIN, B.Sc. (ECON.) M.A.P.H.C., A.M.T.O.R.F.,

Chartered Fuel Technologist

THOMSON & WATSON, LTD. PRINTERS, 11 DACE STREET, BIRMINGHAM
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* Denotes — Incorporates information specifically required by Ministry of Health.

To The Mayor, Aldermen and Councillors of the County Borough of Wallasey.

I have pleasure in presenting to you the Annual Report on the Health, Welfare and School Health Services of the Borough for the year 1960.

1960 was a special year for Wallasey as the Borough celebrated its Golden Jubilee of the granting of the Charter of Incorporation. The Health Department took part in the exhibition in the Civic Hall, and its activities over the fifty years were illustrated by figures, models and documents.

The report of the Medical Officer of Health for the year 1910 shows that there were 149 deaths of infants under one year old, giving an Infant Mortality rate of 86 per 1,000 births. The corresponding figures for 1960 are 45 deaths and a rate of 24.32. The Phthisis death rate per 1,000 of population in 1910 was 0.7 (56 deaths) and in 1960 this was 0.0097 (10 deaths). The 1910 report also states that there were 7 cases of Smallpox and 44 cases of Diphtheria with 4 deaths. In 1960 I am pleased to report that there were no cases of either of these severe infectious diseases in the Borough.

Some of the Department's activities in 1960 were depicted in the Charter Celebrations film "Audemus dum Cavemus."

Vital Statistics

The birth rate for the Borough was 17.88 per 1,000 population, much about the same rate as in 1959 — 17.85. There were 45 deaths of infants under the age of one year, giving an infant mortality rate of 24.32 as compared with a rate of 26.06 in 1959. The perinatal mortality rate (stillbirths and deaths under one week combined per 1,000 total live and stillbirths) was 31.78 as compared with 37.69 in 1959. An analysis of the causes of death of the infants under one week and the apparent causes of the stillbirths is shown on pages 24 - 27, and I am indebted to Dr. Grant, Assistant Medical Officer of Health, for preparing that section of the Report.

Deaths in the Borough in 1960 from all causes numbered 1,302, as compared with 1,295 in 1959, giving a death rate of 12.59 per 1,000 population as compared with 12.55 in 1959. Cancer of the lung accounted for 51 deaths, six fewer than in 1959, and coronary artery disease 275, eleven fewer than in 1959. There were ten deaths from pulmonary tuberculosis as compared with eight in 1959. There were 76 deaths attributed to bronchitis in 1960; this is an increase of nineteen on the previous year. It is hoped that over the course of the next few decades an improvement will be seen in the death rate from respiratory disease as a result of the Council's Clean Air policy.

Infectious Diseases

I am pleased to report that there was no serious outbreak of infectious disease during the year. Three cases of paralytic poliomyelitis occurred. All three cases had not been immunised. It is difficult to understand why some parents do not take advantage of the protection available against this disease and have their children protected with anti-poliomyelitis vaccine.

Health Education

The Superintendent Health Visitor and her Staff form the spearhead of this important function of the Health Department. A full account of the work done in this sphere can be found on pages 49 and 50.

I should just like to comment on the fact that the Health and Education Committees are both much concerned at the state of the children's teeth in the Borough. During the autumn discussions took place in both Committees as to the best means of countering this, and, as stated in the foreword of the School Health Service Report 1960, School Medical Officers, Dental Officers and School Health Visitors have all taken part in a campaign to promote better oral hygiene, as have many of the teaching staff.

In December a fourth full-time Dental Officer was appointed and it is hoped that this will allow schools to be visited more frequently, not only for dental inspections, but for talks on oral hygiene.

It is hoped that the report from the fluoridation demonstration areas in Anglesey, Watford and Kilmarnock will not be long delayed.

Home Nursing Service

This service has continued to function smoothly throughout the year. In January 1960, Miss E. Fairless took up her appointment as Superintendent. There has been practically a full complement of Staff throughout the year. Full details of the District Nurse Training Scheme set up in Wallasey in 1960 can be seen on page 38 of the Report.

Domestic Help Service

This service continued to expand and this is reflected by the increased number of hours worked, particularly with the old people in the Borough.

Ambulance Service

An additional stretcher case ambulance was purchased during the year in order to meet the growing demands on this service. This new ambulance is equipped with a modern resuscitator.

Mr. E. Buschenfeld took up his appointment as Chief Fire and Ambulance Officer in January 1960.

Chiropody Service

A scheme was submitted to the Ministry of Health and approved in March 1960, and was put into operation in May. A description of the service and the number of patients treated and the number of treatments given since the inception of the scheme up to 31st December 1960 is given on page 51.

Anti-Tuberculosis (B.C.G.) Vaccination

Details of this work can be found on pages 46 - 48. It is interesting to note that, since the scheme for testing and vaccinating thirteen-year-old school children commenced in 1955, the percentage found to be Mantoux (Tuberculin) positive has steadily fallen and has reached the low figure of 7.3% in 1960. This is all to the good, as it shows that the total amount of primary infection in the town is becoming less and less.

Mental Health Service

At the end of the section on Mental Health, I have included the proposals for the expansion and development of the Mental Health Services which have been approved by the Ministry of Health. Certain of the proposals regarding staff have already been implemented. Additional staff have been taken on at the Junior Training Centre to cope with the increased number of children in attendance, and a new Mental Welfare Officer has also been appointed. No hostel has yet been built, but during the year several meetings were held with Officers of the Ministry of Health to discuss preliminary sketch plans for a hostel. Pending the provision of an Adult Training Centre, arrangements have been made to hold handicraft classes for a small number of mentally disordered in the community, mostly in the subnormal category, on Welfare premises following the amendment of the scheme made under Sections 29 and 30 of the National Assistance Act 1948 to include the mentally disordered in the definition of "handicapped persons."

Welfare Services

The position with regard to residential accommodation for old people requiring care and attention was again difficult. The 76 beds in "Lamorua," "Redcliffe" and "Newholme" are quite inadequate for the needs of the town. It is hoped that a further 68 beds will be available in 1961 with the opening of "Fernleigh" and "Manor Grange."

As mentioned in my previous reports, much more could be done by the Authority in providing specialised housing for old people, which would greatly prolong the period before old people require a bed in a hostel or a geriatric unit.

During the year a new appointment was made — a Welfare Officer to do rehabilitation work giving advice and practical help to those families about to be evicted, or evicted and in temporary Welfare accommodation or intermediate accommodation. The appointment has certainly proved itself worthwhile as the Officer concerned has been fully occupied ever since she took up her duties with the Welfare Section.

Environmental Health

A full account of the work of the Public Health Inspectors can be found in Section V of this report. Good progress has again been made in slum clearance and a second five-year programme has been drawn up to cover the years 1961-1965. As already mentioned earlier in this foreword, it is hoped that in the next few decades the inhabitants of Wallasey will begin to reap the full benefits of the Council's Clean Air policy, and the work to implement this policy is steadily going on in the Department.

In conclusion, I should like to thank the Chairman and Members of the Health, General Health and Welfare Committees for their interest and sustained support throughout the year. I should also like to thank the Town Clerk and other Chief Officials for their support and helpful advice throughout the year, and also all members of the Staff of the Department for their loyal support and hard work.

I am, Mr. Mayor, Ladies and Gentlemen,

Your obedient servant,

HOWARD W. HALL,

Medical Officer of Health.

PUBLIC HEALTH OFFICERS of the AUTHORITY

Medical Officer of Health and Principal School Medical Officer:

HOWARD W. HALL, M.B., Ch.B., D.P.H.

Town Hall, Wallasey. Telephone No. Wallasey 1600—Ext. 120

Deputy Medical Officer of Health and Deputy Principal School Medical Officer:

WILLIAM F. CHRISTIAN, M.B., Ch.B., D.P.H.

Assistant Medical Officer of Health and School Medical Officer:

EDWARD J. A. O'REILLY, M.B., Ch.B., B.A.O. (Obstetrics)

Assistant Medical Officer of Health, School Medical Officer and Medical Supervisor of Midwives:

ESME I. GRANT, M.R.C.S., L.R.C.P.

Tuberculosis Officer (Part-Time):

JAMES BAXTER, M.B., Ch.B., D.P.H.

Principal Dental Officer:

C. J. LUYA, L.D.S.

Dental Officers (Whole-Time):

W. A. HENDERSON, L.D.S.

E. G. MASON, L.D.S.

T. H. M. MOULDS, L.D.S. (From 5/12/60)

Dental Officers (Part-Time):

T. H. M. MOULDS, L.D.S. (From 11/4/60 to 3/12/60)

Chief Public Health Inspector:

A. GILPIN, B.Sc.(Econ.), M.A.P.H.I., A.M.Inst.F (Chartered Fuel Technologist)

Deputy Chief Public Health Inspector:

A. RIDGWAY

District Public Health Inspectors:

W. H. FARR

R. HUGHES

R. JONES

I. THOMPSON (to 24/7/60)

J. Q. CALLISTER

L. J. JONES (to 15/5/60)

G. CARR

W. GLADDEN

L. G. RINGROW (from 1/11/60)

K. J. WARBRICK (from 1/11/60)

Milk, Dairies and Meat Inspector and Inspector under Diseases of Animals Acts and Orders:

G. A. OWEN

Shops Inspector:

R. L. BASCOMBE

Superintendent Health Visitor/School Nurse:

Mrs. K. SCHOFIELD

Health Visitors/School Nurses (Whole-Time)

Miss E. A. TEGGINS

Miss A. J. EDGE

Miss C. E. MURRELL

Mrs. E. P. NOLAN

Mrs. A. J. SMITH

Mrs. I. D. WINTERBURN (to 30/11/60)

Mrs. W. DOVEY

Miss M. E. ASPINALL

Miss K. E. HIGGINS

Miss E. M. MORGAN

Miss E. WHITBURN

Miss M. B. JONES

Mrs. L. M. JONES

Mrs. M. KEANE

Mrs. E. SIMPSON (from 1/4/60)

Health Visitor/School Nurse (Part-Time):

Mrs. I. D. WINTERBURN (from 1/12/60)

Municipal Midwives:

Mrs. E. E. HINTON	Mrs. P. SHACKLADY
Mrs. F. E. BOYD	Mrs. A. B. TIMEWELL
Miss E. HOMER	Miss I. K. PAISLEY
Miss E. WOODS	

Chief Weights and Measures and Food and Drugs Inspector:

J. A. W. PRICE, Cert. Board of Trade

Weights and Measures and Food and Drugs Inspector:

J. A. ISHERWOOD, Cert. Board of Trade

Public Analyst (Part-Time):

TENNYSON HARRIS

Chief Administrative Assistant:

G. A. LOXHAM, D.P.A.

Clerical Staff:

A. YOUNG, D.M.A. (Senior Clerk) (to 13/11/60)	Miss H. J. HARRIS
J. M. GIBSON	Miss E. MASTERS
A. E. LEWIS (to 22/5/60)	Miss. P. WITTER (to 18/9/60)
O. M. EDWARDS	Miss B. FISHWICK
N. J. POWER	Miss J. FIELDING (from 28/11/60)
Miss G. BOOTH	Miss G. NASH
Miss M. BLENCOWE	Mrs. J. NICHOLSON
Miss S. LENNOX (to 7/2/60)	Mrs. A. E. JONES
Miss B. M. HERRIOT (from 3/10/60)	Miss A. ELCOCK
	Miss S. C. PEALING
	Miss B. WOOD (from 29/2/60)

Part-Time Specialists discharging duties in connection with Special Clinics:

Mr. J. D. ELLIOTT EDWARDS, M.B., Ch.B., D.O.M.S. (Ophthalmic)

Mr. H. DAVIES, M.B., F.R.C.S.(Eng.), Ch.B., Ch.M. (Orthopaedic)

Matrons of Day Nurseries:

Miss E. GREENLY, Central Park Day Nursery

Miss G.E. MORGAN, Oakdale Day Nursery

Miss P. WARNER, Eastway Day Nursery

Superintendent District Nursing Service:

Miss E. FAIRLESS, S.R.N., SC.M., Q.N.S., H.V.Cert. (from 11/1/60)

District Nurses (Whole-Time):

Mrs. M. PRENDERGAST	Miss J. A. OWEN
Mrs. S. DUDLEY	Mrs. M. P. MUTCH
Miss B. JOY	Mrs. V. BLUNT (to 31/10/60)
Mrs. K. ELSON	Miss J. M. GASKIN
Mrs. J. DON	Miss S. M. DAVIES
Miss M. GOVIER	Mrs. I. A. MATTHEWS (from 1/7/60)
Mrs. M. HAZLETT	Miss B. E. JONES (from 1/7/60)
Mrs. H. M. GRAY	Mrs. K. DUNNE (from 1/4/60)
Mrs. D. EVANS	Mrs. D. M. WINDER (to 31/5/60)
Mrs. E. M. BLEASE	

District Nurses (Part-Time):

Mrs. M. M. KING

Mrs. G. WALL

Mrs. I. A. MATTHEWS (to 30/6/60)

Mrs. G. ULYATT (to 31/5/60)

Mrs. C. JONES (to 13/7/60)

Mrs. P. A. BUTLER (to 31/8/60)

Mrs. P. A. OWEN (to 21/8/60)

Mrs. P. MERRALL (to 17/1/60)

Domestic Help Organiser:

Mrs. G. M. FALLA

Supervisor Junior Training Centre:

Miss I. P. D. MACDONALD

Mental Welfare Officers:

F. WALL

K. MERCER

Mrs. E. A. BRERETON

J. HOUGHTON (from 1/12/60)

Mental Health Worker:

Miss M. V. PHILLIPS

WELFARE SERVICES

Senior Welfare Officer:

R. C. OLLIVE

Welfare Officers:

F. WALL

K. MERCER

Mrs. E. A. BRERETON

J. HOUGHTON (from 1/12/60)

Welfare Officer (Rehabilitation) :

Miss N. G. TALBOT (from 1/3/60)

Welfare Officer (Handicapped Persons):

Mrs. W. DAVIES

Handicrafts Teacher (Handicapped Persons):

Mrs. C. W. GRIFFITH

Home Teachers of the Blind:

Miss A. ROGERS

Miss I. FOGGIN (to 31/1/60)

Miss M. M. GILLESPIE from 2/5/60)

Clerical Staff:

A. C. HINTON

H. S. FLYNN

Miss D. M. PERKINS

Miss E. C. BIRCHALL

Matrons of Hostels for the Aged:

Miss E. PARSONS, "Lamorna"

Mrs. A. P. JACKSON, "Redcliffe"

Miss M. ROBERTS, "Newholme"

Warden—Reception Centre:

Mrs. G. M. TEAGUE



PART I.

Vital Statistics, etc.

VITAL STATISTICS, Etc.

(a) As requested by the Ministry of Health, in accordance with Circular 1/61:—

	1959	1960
Live Births—Males	938	950
Females	904	900
	<hr/> 1,842	<hr/> 1,850
Live birth rate per 1,000 population ...	17.85	17.88
Illegitimate live births per cent of total live births	4.02	4.16
Still Births—Males	21	20
Females	21	18
	<hr/> 42	<hr/> 38
Rate per 1,000 total live and still births ...	22.29	20.13
Total live and still births	1,884	1,888
Infant deaths (deaths under one year)		
Males	21	28
Females	27	17
	<hr/> 48	<hr/> 45
Infant Mortality Rates—		
Total infant deaths per 1,000 total live births	26.06	24.32
Legitimate infant deaths per 1,000 legitimate live births	26.58	24.82
Illegitimate infant deaths per 1,000 illegitimate live births	13.51	12.99
Neo-natal Mortality Rate (deaths under 4 weeks per 1,000 total live births)	20.09	15.68
Early Neo-natal Mortality Rate (deaths under one week per 1,000 total live births)	15.74	11.89
Perinatal Mortality Rate (Stillbirths and deaths under one week combined per 1,000 total live and still births)	37.69	31.78
Maternal Mortality (including abortion)—		
Number of deaths	1	1
Rate per 1,000 total live and still births	0.53	0.53

	1959	1960
(b) Other details: —		
Census population (April, 1951)	101,369	101,369
Registrar General's estimated population		
at mid-year	103,200	103,450
Deaths to 31st December		
Males	629	653
Females	666	649
	<hr/> 1,295 <hr/>	<hr/> 1,302 <hr/>
Death rate (unadjusted) per 1,000		
of estimated population	12.55	12.59
Death rate per 1,000 of estimated popula-		
tion adjusted by area comparability		
factor of 1.02	12.80	12.84
Death rate per 1,000 of estimated		
population—England and Wales	11.6	11.5
Birth rate per 1,000 of estimated		
population—England and Wales	16.5	17.1
Phthisis death rate per 1,000 of		
population	0.078	0.097
Area in acres as ascertained by Ordnance		
Survey, January, 1935	5,961	5,961
River and sea frontage	Slightly less than 8 miles	
Inhabited houses at 31st December	30,939	31,170
Uninhabited houses at 31st December	559	505
Rateable value of the borough as at		
31st December	£1,387,160	£1,402,161
	1959/60	1960/61
Yield of ld. rate	£5,538	£5,685

PRINCIPAL CAUSES OF DEATH

	1959	1960
Heart Disease	472	466
Cancer	208	214
Respiratory Diseases—		
Pneumonia	61	66
Bronchitis	57	76
Other	18	8
	136	150
Vascular lesions of nervous system	187	188
Violent Deaths (including suicides)	42	53

MATERNITY MORTALITY

There was one maternal death of a Wallasey resident during 1960

SUMMARY OF DEATHS DURING THE YEAR 1960

CAUSES OF DEATH	SEXES		All Ages	DEATHS IN WHOLE DISTRICT							
	M.	F.		0-	1-	5-	15-	25-	45-	65-	75-
Tuberculosis—											
respiratory ...	7	3	10	—	—	—	—	1	5	2	2
Tuberculosis—other ..	—	2	2	—	—	—	—	—	1	—	1
Syphilitic disease ..	—	1	1	—	—	—	—	—	—	1	—
Diphtheria ...	—	—	—	—	—	—	—	—	—	—	—
Whooping cough ..	—	—	—	—	—	—	—	—	—	—	—
Meningococcal infection ...	—	—	—	—	—	—	—	—	—	—	—
Acute polio-myelitis ..	—	—	—	—	—	—	—	—	—	—	—
Measles ...	—	—	—	—	—	—	—	—	—	—	—
Other infective and parasitic diseases ..	—	2	2	—	—	—	—	—	1	—	1
Malignant neoplasm—stomach ...	18	19	37	—	—	—	—	—	10	6	21
Malignant neoplasm—lung, bronchus ..	40	11	51	—	—	—	—	2	22	21	6
Malignant neoplasm—breast ...	—	19	19	—	—	—	—	3	8	6	2
Malignant neoplasm—uterus ...	—	4	4	—	—	—	—	1	1	1	1
Other malignant and lymphatic neoplasms ...	47	56	103	—	—	—	—	3	33	36	31
Leukaemia, Aleukaemia ...	2	5	7	—	—	3	—	—	1	2	1
Diabetes ...	1	6	7	—	—	—	—	2	2	—	3
Vascular lesions of nervous system ..	81	107	188	—	—	—	—	7	31	50	100
Coronary disease angina ...	162	113	275	—	—	—	—	3	73	90	109
Hypertension with heart disease ...	15	16	31	—	—	—	—	—	4	8	19
Other heart disease ..	68	92	160	—	—	—	1	6	20	27	106
Other circulatory disease ...	8	22	30	—	—	—	—	—	4	6	20
Influenza ...	—	—	—	—	—	—	—	—	—	—	—
Pneumonia ...	34	32	66	7	—	—	—	1	8	12	3
Bronchitis ...	56	20	76	1	—	—	—	1	20	29	2
Other diseases of respiratory system ..	3	5	8	—	—	—	1	—	3	1	—
Ulcer of stomach and duodenum ...	10	4	14	—	—	—	—	—	3	3	—
Gastritis, Enteritis and diarrhoea ...	6	4	10	4	—	—	1	—	1	—	—
Nephritis and Nephrosis ...	4	9	13	—	—	—	—	1	3	4	—
Hyperplasia of prostate ..	11	—	11	—	—	—	—	—	1	2	—
Pregnancy, childbirth abortion ...	—	1	1	—	—	—	—	1	—	—	—
Congenital malformations ...	8	2	10	9	—	—	—	—	1	—	—
Other defined and ill-defined diseases ..	43	70	113	22	1	—	—	4	12	21	—
Motor vehicle accidents	4	3	7	—	1	1	1	1	3	—	—
All other accidents ..	13	9	22	1	—	—	2	4	4	2	—
Suicide ...	12	9	21	—	—	—	1	4	12	2	—
Homicide and operations of war ...	—	3	3	1	—	1	1	—	—	—	—
ALL CAUSES ..	653	649	1,302	45	2	5	8	45	287	332	—

TABLE SHOWING (a) **Infant Deaths and Death Rates.**
 (b) **Neo-natal deaths and Death Rates.**
 (c) **Deaths and Death Rates (infants 4 weeks to 12 months).**

Year	Infants		Neo-natal			4 weeks—12 months		
	Deaths	Rate per 1,000 Births	Deaths	Rate per 1,000 Births	% of Total Infant Deaths	Deaths	Rate per 1,000 Births	% of Total Infant Deaths
1944	77	43.0	34	19.0	44.16	43	24.0	55.84
1945	97	56.8	38	22.3	39.18	59	34.57	60.82
1946	87	42.2	51	24.7	58.62	36	17.48	41.38
1947	111	51.1	57	26.9	51.35	54	25.09	48.65
1948	78	43.5	38	20.67	48.72	40	22.35	51.28
1949	64	35.8	34	19.0	53.13	30	16.82	46.87
1950	49	28.7	28	16.41	57.14	21	12.31	42.86
1951	55	32.4	35	20.62	63.63	20	11.19	36.37
1952	56	33.3	43	25.62	76.78	13	7.75	23.22
1953	41	24.7	29	17.51	70.74	12	7.25	29.26
1954	43	25.1	29	16.94	67.44	14	8.12	32.56
1955	41	25.4	29	17.96	70.74	12	7.44	29.26
1956	42	24.07	31	17.77	73.81	11	6.30	26.19
1957	48	26.10	33	17.94	68.75	15	8.16	31.25
1958	44	24.69	32	17.96	72.73	12	6.73	27.27
1959	48	26.06	37	20.09	77.08	11	5.97	22.92
1960	45	24.32	29	15.68	64.44	16	8.64	35.56

TABLE SHOWING the Infantile Mortality rates of the Borough as compared with the figures for the whole of England and Wales for the census years from 1901 to 1951 and consecutive years to 1960.

Deaths under 1 year per 1,000 Live Births, England and Wales.

<i>Year</i>	<i>Wallasey</i>	<i>England and Wales</i>
1901	142.0	151
1911	109.0	130
1921	59.0	83
1931	44.8	66
1941	78.9	60
1951	32.4	29
1952	33.3	27
1953	24.7	27
1954	25.1	25
1955	25.4	25
1956	24.07	24
1957	26.10	23
1958	24.69	23
1959	26.06	22
1960	24.32	22

ILLEGITIMACY

During the year there were 77 illegitimate births (42 Male: 35 Female) recorded by the Registrar-General as belonging to the borough, compared with 74 in 1959. This gives an illegitimate birth-rate of 41.62 per thousand total live births, as compared with 40.17 in 1959.

There was one death of an illegitimate infant during the year 1960 and 5 illegitimate still births (1 male: 4 female).

ECONOMIC CONDITIONS

The number of unemployed persons in the borough in January, 1960, was 1,677 and in December, 1,325, as compared with 1,800 and 1,535 respectively in January and December, 1959.

The following amounts were expended on Unemployment, etc., Benefit by the Wallasey Employment Exchange :

Unemployment Benefit	£121,210
Assistance Allowances	£79,155

The number of persons on the Unemployment Register normally starts to diminish in February each year, until July, when it is at its lowest. The figures for July, 1959 were 1,214 and for July, 1960, 1,116.

PART II.

*Occurrence and Control
of Infectious Diseases*

CASES OF INFECTIOUS AND OTHER NOTIFIABLE DISEASES NOTIFIED IN WALLASEY DURING 1960

NOTIFIABLE DISEASES	Totals	Cases notified at ages										
		under 1	1	2	3	4	5-9	10-14	15-24	25-44	45-64	65 & over
Small-pox	—	—	—	—	—	—	—	—	—	—	—	—
Malaria	—	—	—	—	—	—	—	—	—	—	—	—
Food Poisoning	5	—	—	1	—	—	—	—	1	1	1	1
Dysentery	100	4	10	9	11	4	18	9	6	20	7	2
Diphtheria (including Membranous Croup)	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas	7	—	—	—	—	—	—	—	—	1	5	1
Scarlet Fever	55	—	1	4	10	8	21	8	2	1	—	—
Paratyphoid	1	—	—	—	—	—	—	1	—	—	—	—
Typhoid Fever	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia	11	—	—	—	—	—	—	—	3	8	—	—
Meningococcal Infection	1	—	1	—	—	—	—	—	—	—	—	—
Poliomyelitis (Paralytic)	3	—	—	1	—	—	1	—	—	1	—	—
Poliomyelitis (Non-Paralytic)	—	—	—	—	—	—	—	—	—	—	—	—
Pneumonia	23	1	—	—	—	—	—	—	3	3	12	4
Ophthalmia Neonatorum	—	—	—	—	—	—	—	—	—	—	—	—
Pulmonary Tuberculosis	68	—	—	2	—	—	—	3	15	5	31	12
Other forms of Tuber- culosis	10	—	—	—	—	—	—	—	2	3	3	2
Measles	587	27	53	72	85	79	267	4	—	—	—	—
Whooping Cough	46	6	6	10	6	2	15	1	—	—	—	—
Encephalitis Lethargica	—	—	—	—	—	—	—	—	—	—	—	—
Post Infectious Encephalitis	—	—	—	—	—	—	—	—	—	—	—	—
Acute Infective Encephalitis	—	—	—	—	—	—	—	—	—	—	—	—
Polio-Encephalitis	—	—	—	—	—	—	—	—	—	—	—	—
TOTALS	917	38	71	99	112	93	322	26	32	43	59	2

INFECTIOUS DISEASES — INVESTIGATIONS AND VISITS OF SURVEILLANCE

During the year a total of 1,021 visits were made by the health visitors and public health inspectors to infectious cases and contacts, as follows:—

	<i>Enquiry visits</i>	<i>Visits of Surveillance</i>	<i>Total visits</i>
Health Visitors	588	89	677
Public Health Inspectors ...	108	236	344
	696	325	1,021

A total of 769 specimens were submitted to the Public Health Laboratory in connection with the occurrence of cases of food poisoning, dysentery and meningococcal infections.

Diphtheria

For the fifth year in succession there were no cases of diphtheria notified.

The following table shows the number of notifications, confirmed cases and immunisations each year since 1934:—

<i>Year</i>	<i>Notifications</i>	<i>Confirmed Cases</i>	<i>Number Immunised</i>	<i>Deaths</i>
1934	258	241	—	25
1935	275	239	181	18
1936	259	227	889	12
1937	241	209	451	12
1938	255	235	657	13
1939	187	185	110	11
1940	143	128	230	5
1941	220	182	951	10
1942	312	223	3,490	12
1943	157	79	2,263	3
1944	109	59	1,257	3
1945	120	66	1,411	1
1946	96	52	1,291	*1
1947	29	8	1,028	*1
1948	27	13	1,459	†3
1949	14	14	1,208	—
1950	11	6	1,301	—
1951	6	5	1,328	—
1952	7	3	1,321	—
1953	14	10	1,120	*1
1954	5	3	1,483	—
1955	3	2	1,325	—
1956	—	—	1,357	—
1957	—	—	1,084	—
1958	—	—	1,449	—
1959	—	—	1,009	—
1960	—	—	1,853	—

*Not immunised.

†2 not immunised and 1 inward transfer.

The fall in the incidence of diphtheria is shown by the following table of corrected notifications and deaths for England and Wales since 1944: —

<i>Year</i>	<i>Deaths</i>	<i>Corrected notifications</i>
1944	934	23,199
1945	722	18,596
1946	472	11,986
1947	244	5,609
1948	156	3,575
1949	84	1,890
1950	49	962
1951	33	664
1952	32	376
1953	23	266
1954	9	173
1955	13	155
1956	8	53
1957	6	37
1958	8	78
1959	1	102
1960	3	69

It will be noted that there has been a slight increase in the number of deaths during 1960.

The importance of parents having their children immunised against diphtheria cannot be over-emphasised.

Scarlet Fever.

55 cases of scarlet fever were notified during 1960 compared with 84 cases in 1959 and 134 in 1958. There were no deaths.

This infectious disease is of a very mild type compared with that of twenty or thirty years ago, so much so that many doctors in the borough do not notify cases. Notification is, however, important when a food handler is concerned.

Puerperal Pyrexia

There were 11 notifications of puerperal pyrexia during the year, none of which proved fatal

Ophthalmia Neonatorum

There were no cases of ophthalmia neonatorum notified during the year.

Whooping Cough

46 cases were notified during the year. Of these seven children had received a full course of immunisation against whooping cough; three children had received one injection only and two had received two injections only. No cases were fatal. During 1960 a total of 1,729 children were immunised.

Measles

There were 587 cases of measles notified during 1960 compared with 477 in 1959. There were no deaths.

Health visitors do not visit homes where it is known that the standard of care is satisfactory.

Paratyphoid Fever

One case of Paratyphoid B was confirmed during the year. The patient was a boy aged 11 years who was admitted to hospital and operated on for appendicitis. He was then found to be also suffering from Paratyphoid B, Phage 1, Variety 9 and was transferred to St. James' Hospital, Birkenhead. The long lapse of time between the onset of the illness and its notification prevented sufficient evidence being obtained regarding the food consumed prior to the onset.

Food Poisoning

Only 5 cases of food poisoning were confirmed during the year, compared with 27 cases in 1959. In all of the cases only one member of each household was affected. In 1 case one other member of the household was found to be a symptomless carrier and in another case two other members of the household were found to be symptomless carriers. The causative agent in 3 cases was *Salmonella typhi* murium, in 1 case *Staph Pyogenes* Coagulase Positive and in the remaining case, *Salmonella Thompson* Group C.

Dysentery

There were 100 confirmed cases of sonne dysentery during the year. 345 enquiries and 609 visits of surveillance were made by health visitors and public health inspectors. 538 specimens were submitted to the Public Health Laboratory for bacteriological examination. All cases were kept under surveillance until three consecutive specimens were found to be free from pathogenic organisms.

Poliomyelitis

Three cases of acute poliomyelitis occurred during the year. It is significant to note that in each case the patient had not been immunised.

Details are as follows:—

1. Girl aged 4 years. Mild case with paralysis of both deltoid muscles. She made a good recovery.
2. Housewife aged 39 years. Both legs were paralysed. At the time of writing this report some eight months later the patient is still in hospital, and will shortly be transferred to a rehabilitation unit.
3. Girl aged 9 years. Initially both legs were affected and also the muscles of respiration. The child has now made a good recovery, and there is no residual paralysis of any sort.

Meningitis

One case of pneumococcal meningitis occurred in a child aged one year and six months. This baby was born with a pilonidal sinus and it is probable that meningitis developed as a direct complication of this lesion.

Smallpox

No case of smallpox occurred during the year.

PART III.

*Services provided under Part III of
The National Health Service Act, 1946.*

Section 21—Health Centres.

- „ 22—Care of Mothers and Young Children.
- „ 23—Midwifery Services.
- „ 24—Health Visiting.
- „ 25—Home Nursing.
- „ 26—Vaccination and Immunisation.
- „ 27—Ambulance Service.
- „ 28—Prevention of Illness—Care and After-Care.
- „ 29—Domestic Help Service.
- „ 28 and 51—Mental Health Services.

The National Health Service Act, 1946.

SECTION 21 — HEALTH CENTRES

No Health Centres have been constructed or are in course of construction in Wallasey.

Details of a proposed Health Centre in the Leasowe Estate were submitted to the Health Committee and the matter referred to the Wallasey Executive Council. A questionnaire was sent to all residents in the area. As the Executive Council did not wish, however, to proceed with the matter, it was resolved that plans be prepared for the construction of a Clinic only.

SECTION 22—CARE OF MOTHERS AND YOUNG CHILDREN

Ante-Natal Clinics - These clinics are held as follows:—

(a) The Midwives' Clinics :

Alternate Mondays at Merton Road from 2 p.m. to 4 p.m.
 Alternate Monday evenings at Water Street 6 p.m. to 7 p.m.
 Tuesday evenings Water Street 6 p.m. to 7 p.m.
 Thursday evenings, Moreton Clinic 6 p.m. to 7 p.m.

The following are details of attendances during 1960:—

	<i>Sessions held</i>	<i>Expectant Mothers attending</i>	<i>No. of attendances</i>
Water Street	51	171	783
Merton Road	48	185	717
Oakenholt Road	52	166	678
	<hr/> 151 <hr/>	<hr/> 522 <hr/>	<hr/> 2,178 <hr/>

(b) The Assistant Medical Officer of Health's Clinics :

Water Street and Merton Road — Alternate Mondays at 1-45 p.m.

Moreton Clinic — 3rd Friday in the month at 1-45 p.m.

The following are details of attendances during 1960:—

Expectant mothers on books at January 1st ...	24
New cases during the year	55
Names on books at December 31st	13
Attendances of Expectant Mothers	148

In most county boroughs the midwives' clinics have now almost completely superseded those of the Assistant Medical Officers of Health. The majority of expectant mothers who are going to have a domiciliary confinement book the midwife at her clinic and then attend as requested at monthly or fortnightly intervals. They also visit their own doctor for a regular medical and obstetrical examination and thus both members of the team that will be concerned with the actual confinement are well acquainted with the patient, and alive to any difficulties or problems which may arise when labour commences.

There can be little excuse now for bad or inadequate ante-natal care, and it is because of this that we should expect to see a still lower maternal and infant mortality rate.

Toxaemia of pregnancy still accounts for the majority of stillbirths and maternal deaths, and everything possible must be done to reduce the incidence of this condition.

On the whole, there is good co-operation between our midwives and the general practitioners, and my only regret is that the role of the Assistant Medical Officer of Health in the present scheme of ante-natal care is becoming so small and insignificant. There are still a few patients who, for one reason or another, prefer to attend the Assistant Medical Officer's local authority clinic, or, are referred by midwife or general practitioner for blood test or second opinion. Relaxation exercises are held at the midwives' clinics and these are made available to any expectant mother who wishes to attend.

More cases are now accepted at Highfield Maternity Hospital. These patients attend their doctor's ante-natal clinic only, and thus do not get the opportunity to benefit from the health education provided for the expectant mother by the staff of the local authority. The importance of such education to the expectant mother has now been fully recognised by the World Health Organisation. The object of maternity care is to ensure that every expectant and nursing mother maintains good health, learns the art of child care, has a normal delivery and bears healthy children, and it is to this end that we must all strive.

Post-Natal Clinics

7 mothers attended for post-natal examination during the year, making 11 attendances. In addition the health visitors and midwives encourage and stress the importance of mothers attending for post natal examination by their own doctors.

Care of Premature Babies

The Midwives, Health Visitors and Maternity Hospitals work in close liaison with each other to ensure that premature infants receive the correct care and attention in the home.

The Maternity Hospitals notify the Department of premature births, so that the delay between the date of discharge and the date of the health visitor's first call is as little as possible.

Home Helps are provided when necessary in cases where premature infants are born at home.

The following table gives details of premature live births during the year:—

Weight at birth	Premature Live Births															Still-Births Premature		
	Born in Hospital			Born at home and nursed entirely at home			Born at home and transferred to hospital on or before 28th day			Born in nursing home and nursed entirely there			Born in nursing home and transferred to hospital on or before 28th day			Born in hospital	Born at home	Born in nursing home
	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days			
3 lb. 4 oz. or less (1,500 gms. or less)	9	3	2	—	—	—	—	—	—	—	—	—	—	—	—	2	—	—
Over 3 lb. 4 oz. up to and including 4 lb. 6 oz. (1,500-2,000 gms.)	21	3	15	1	—	1	2	—	2	—	—	—	—	—	—	5	—	—
Over 4 lb. 6 oz. up to and including 4 lb. 15 oz. (2,000-2,250 gms.)	23	—	22	4	—	4	—	—	—	—	—	—	—	—	—	5	—	—
Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2,250-2,500 gms.)	45	1	42	15	—	15	2	—	2	—	—	—	—	—	—	2	—	—
Totals ...	98	7	81	20	—	20	4	—	4	—	—	—	—	—	—	14	—	—

The Public Health Department has scales which can be had on loan for weighing premature babies in the homes. No charge is made. Fifty-four parents took advantage of this service during the year.

The Health Visitors attended 43 Saturday morning sessions at Dr. Farquhar's premature baby clinics at Highfield during the year.

Stillbirths and Neo-Natal Deaths.

An investigation has been made of the causes of death, and the nature of foetal and congenital abnormalities (if present) of all premature and full time stillbirths and neo-natal deaths in the borough during 1960.

The results are tabled below:—

Total number of births	1,888
Total number of stillbirths	33
Premature	14
Full Term	19

Total number of neo-natal deaths 29
(age 28 days and under)

Premature 17

Full Term 12

Foetal abnormalities were present in four stillbirths.

Congenital abnormalities were present in 8 neo-natal deaths.

Abnormalities

The foetal abnormalities present in the four stillbirths were as follows:—

Anencephalic head 3

Abnormality of the external genitalia 1

The congenital abnormalities present in 8 neo-natal deaths were as follows:—

1. Spina bifida
Multiple abnormalities of skull Died aged 3 days.
Talipes Equino-varus
2. Anencephalic head Died aged 2 days.
3. Spina bifida and hydrocephalus Died aged 3 weeks.
4. Patent ductus arteriosus
Pseudo-hermaphrodite Died aged 45 minutes.
Multiple skeletal defects
Hypoplasia of lungs
5. Congenital heart disease Died aged 3 days.
6. Congenital renal agenesis
Hypoplasia of kidneys Died aged 20 minutes.
Absence of bladder
7. Congenital jejunal atresia Died aged 3 weeks.
8. Hypospadias Died of broncho-pneumonia
aged 16 days.

Apparent cause of stillbirth

Premature Stillbirths :

Asphyxia 3
Atelectasis 4
Maceration 2
Anencephaly 1
Cerebral or intra-cranial haemorrhage ... 3
Erythroblastosis foetalis 1

Full-term Stillbirths :

Asphyxia and atelectasis	6	
Asphyxia due to ruptured uterus	2	
Tentorial tear and asphyxia	2	
Maceration	3	
Cerebral haemorrhage	1	
Anencephaly	2	
Breech and contracted pelvis	1	
Severe anaemia and cardiac failure	1	
Retro-peritoneal haemorrhage and shock	1	
	—	19

Premature neo-natal deaths :

Atelectasis	5	
Atelectasis with gross general deformity ...	1	
Anencephalic	1	
Intra-ventricular cerebral haemorrhage ...	4	
Pyaemia due to liver and lung abscess	1	
Broncho-pneumonia 2 lbs. 4 ozs.	1	
Prematurity 1 lb. $\frac{1}{2}$ oz.		
3 lb. 2 ozs.	3	
2 lbs.		
	—	17

Full-term neo-natal deaths :

Broncho-pneumonia and atelectasis	4	
Cerebral haemorrhage	1	
Congenital cardiac disease	1	
Toxoplasmosis with cysts on liver and brain	1	
Jejunal atresia and gangrene of small bowel	1	
Hydrocephalus and spina bifida	1	
Spina bifida. Talipes equino-varus and multiple abnormalities of skull	1	
Hydrops foetalis with congenital renal disease — absence of bladder	1	
	—	12

(The analysis of stillbirths is based on the information available to the department locally).

Analysis of the stillbirths and perinatal deaths is as follows:—

Still births. Total 33.

		% of total
Asphyxia and pulmonary syndrome ...	15	45%
Intra-cranial haemorrhage and birth trauma	6	18%
Maceration	5	15%
Anencephaly	3	9%
Miscellaneous	3	9%
Erythroblastosis or haemolytic disease of the newborn	1	4%

Neo-Natal deaths. Total 29.

Atelectasis and pulmonary syndrome ...	11	38%
Intra-cranial haemorrhage and birth injury	6	21%

Congenital Abnormalities	7	14%
Prematurity (cause unknown)	3	10%
Miscellaneous	2	7%

The methods of investigation and classification of the causes of perinatal mortality vary considerably, but for practical purposes the hard core of stillbirths and neo-natal deaths is made up of prematurity, asphyxia and atelectasis, birth injury and congenital malformations.

The dominant maternal factor in these deaths is still toxæmia of pregnancy and every effort must be made to reduce this present perinatal mortality rate by better ante-natal care, careful selection of cases for hospital confinement and further research into toxæmia of pregnancy, and the other causes mentioned above.

With the introduction in accordance with the Population (Statistics) Act, 1960, of the new stillbirth certificate, it is hoped that more light will be thrown on the causes of stillbirths.

Child Welfare Clinics

Although the pattern of the local authority's child welfare clinics has not changed outwardly since the inception of the National Health Service, and their popularity in Wallasey remains unaltered, attention is being directed to a wider concept of health, and includes in its scope emotional, mental and environmental factors. It is with this aspect in mind that the advice and help given at these clinics, by health visitors and medical officers, is directed more and more to the promotion of sound emotional and psychological development in the child.

Physical health is, of course, not neglected, and the weekly weighing and consultation about baby's progress and feeding is the first consideration, but more and more often now do the mothers seek advice from us about early behaviour difficulties, and they welcome the opportunity of discussing these at some length with the medical officer and the health visitor. They realise only too well the importance of trying to nip these psychological problems in the bud at the earliest possible moment.

In some cases, the environmental factors as well as the personal relationships have to be re-adjusted and, where this is not possible or not accepted, it may be found necessary to refer the mother and child to a psychiatrist or Child Guidance Clinic for further advice and treatment.

The continuation and extension of mass immunisation of the 0-5 year old child against diphtheria, whooping cough, tetanus, poliomyelitis and smallpox is a major concern of the maternal and child health service, and, with the exception of the vaccination against smallpox which is carried out by the family doctor, these measures are all made available either at the child welfare clinics or at special clinics. The aim is to complete the primary course of diphtheria, pertussis and tetanus in early infancy, by about 5 months, and to give a booster dose at 18 months, and again before school entry, and in the case of poliomyelitis, this is commenced at 6-8 months, two doses being given at 4-6 week intervals, and a third dose 7 months later.

With modern advances in the treatment of the young deaf child, early ascertainment is essential for full benefit to be obtained, and it is to this end that our health visitors have had special training in the application of screening tests of hearing in very young children.

Early detection of physical handicap is also essential, and the staff of the Child Welfare Clinics have a unique opportunity of detecting such conditions as congenital dislocation of the hip, strabismus, cerebral palsy, feet defects and defects of vision and hearing.

Routine examination of the baby's urine at about 8 weeks may reveal the rare metabolic disease known as phenylketonuria, which is known to cause severe mental retardation but which, if discovered early enough, responds well to dietary treatment.

The toddlers' clinics which are held twice a month at Moreton are quite well attended (about 50% to 60% of those called up attend) and the mothers who come seem to appreciate this opportunity of having their child medically examined, and of discussing with the doctor any behaviour problems which may have arisen. Habit training and food fads are the problems most frequently brought to our notice and a little advice and a lot of re-assurance seem to produce good results.

I should like to take this opportunity once again of thanking our voluntary helpers who come along so regularly and help with the weighing and charting, and make tea for the mothers, thereby enabling the health visitors to undertake the more important aspects of child welfare work, such as health education and talks on mothercraft.

The Clinics at which a doctor attends on each occasion are held in the afternoon of the following days:—

Health Clinic, Water Street	Tuesdays
Health Clinic, Oakenholt Road, Moreton ...	Tuesdays
Parish Hall, Wallasey Village	Wednesdays
Trinity Church Hall, Manor Road	Thursdays
Congregational Church Hall, Princess Road	Thursdays
Leasowe Children's Hospital	1st, 2nd and 4th Wednesday in month

The number of attendances during the year was:

	Water Street	Moreton	Princess Road	Wallasey Village	Trinity Hall Liscard	Leasowe Hospital	Totals
Children under one year of age	2,169	2,580	2,468	2,522	1,628	447	11,814
Children between one and five years	847	759	907	971	847	336	4,667

Toddlers' Clinic

Number of Sessions held	23
Number of children called up	575
Number who attended	286*

(*This number is included in Moreton Child Welfare Clinic figures)

Child Guidance

A Child Guidance Clinic is provided by the Local Education Authority in this borough, from which the child guidance team operates. A report of the consultant psychiatrist is included in the School Health Service report at the end of this publication. In addition, there is a Child Psychiatric Unit attached to the hospital service. I am pleased to report that good relationships exist between both clinics, and information is freely transferable, both between the clinics and also to the School Health Service and Medical Officer of Health, who is also the Principal School Medical Officer. Information is also made available to the general practitioners.

A health visitor has attended the hospital psychiatric clinic throughout the year and is thus able, with her personal knowledge of the children's home background, to assist when a child's behaviour or emotional development is causing concern. Subsequent to Circular 3/59 it was possible to arrange for a consultant psychiatrist from the hospital service to address the medical staff and groups of health visitors on such problems as they may encounter at the Child Welfare Clinics and in their regular contacts with mothers of young children.

The staff working in child welfare centres are familiar with the child guidance service, and in those cases where they cannot advise the parents themselves, refer the case to the child guidance team. Alternatively, arrangements are made through the general practitioners for attendance at the hospital psychiatric clinic.

Distribution of Welfare Foods

Welfare foods, i.e., National dried milk, cod liver oil, orange juice and vitamin tablets were distributed from the following points during the year:—

25a Liscard Village ; Health Clinic, Moreton ; Water Street Clinic, and at the clinics held in Wallasey Village Parish Hall, Princess Road Church Hall and Leasowe Hospital.

The following table shows the amounts of welfare foods which have been distributed during the years 1956 to 1960 inclusive:—

	1956	1957	1958	1959	1960
NATIONAL DRIED MILK					
Number of packets given free ...	506	512	695	1,244	1,262
„ „ sold ...	46,644	38,127	31,110	29,125	25,553
COD LIVER OIL, ORANGE JUICE, ETC.					
Number of bottles of:					
Cod Liver Oil ...	11,154	9,252	5,257	5,168	5,396
Vitamin Capsules ...	5,313	5,150	4,539	5,022	5,031
Orange Juice (Free) ...	487	624	65	2	30
„ „ (Sold) ...	78,823	81,771	48,139	47,842	46,115

During the year the number of packets of dried milk (other than National dried milk), cereals, etc., sold at the Clinics was 17,999 realising a total of £2,393 14s. 4d., compared with 15,882 packets sold in 1959 which realised £2,012 10s. 5d.

Priority Dental Services

The following tables give particulars with regard to the dental care of expectant and nursing mothers, and children under school age:—

- (a) Number of officers employed at the end of the year on a salary basis in terms of wholetime officers to the maternity and child welfare service.

Principal Dental Officer ...	$\frac{1}{8}$ th
Dental Officers ...	$\frac{3}{8}$ ths

- (b) Number of officers employed at the end of the year, on a sessional basis, in terms of wholetime officers to the maternity and child welfare service ...

Nil

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- (c) Number of dental clinics in operation during the year

- (d) Number of sessions (i.e., equivalent complete half days) devoted to maternity and child welfare patients during the year ...

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NUMBERS PROVIDED WITH DENTAL CARE :—

	Examined	Needing Treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers ...	86	76	76	54
Children under Five	272	207	201	196

FORMS OF DENTAL TREATMENT PROVIDED

	Scalings and Gum Treatment	Fillings	Silver Nitrate Treatment	Crowns or Inlays	Extractions	General Anaesthetics	Dentures Provided		Radio-graphs
							Full Upper or Lower	Partial Upper or Lower	
Expectant and Nursing Mothers	16	32	—	—	293	47	29	21 (3 repairs)	—
Children under Five	—	27	—	—	214	161	—	—	—

Day Nurseries

Dr. Esme I. Grant, Assistant Medical Officer of Health, reports as follows:—

“The day nurseries in Wallasey are still well-attended. It is very difficult to maintain a high average attendance because there are so many factors which can lower this—an epidemic of some infectious disease, school holidays, when an older child is at home and can look after the younger ones, bad weather causing a high rate of upper respiratory infection, or the mother herself taking time off from work. Then again, there is the distribution of the children into the various age groups — there may be vacancies in the baby nursery but none in the toddlers’ room or vice versa, and therefore, for the time being, certain children have to be refused.

There is no doubt, however, that mothers who go out to work whether from choice or necessity, prefer to have their children in the capable hands and expert care of our nursery trained staff, than with neighbours or even relatives. There are very few, if any, complaints from mothers with regard to the attention their children receive in the nursery, but it is not uncommon to get letters of thanks and gratitude from them, when the children reach school age or for some other reason, have to leave our happy establishments.

There is a great deal written in the press and elsewhere of the incalculable harm done to children of tender years who are left to the care of nursery staff in a day nursery whilst mothers go out to work to earn money for luxuries, rather than the necessities of life, but I think this is grossly exaggerated and there is little real proof of it. Almost, without exception, the children are happy and contented, and thrive both mentally and physically in the cheery, friendly, noisy atmosphere of the nurseries. They play well, eat well, sleep well, and have all their needs catered for, and when it is time to go home, they run happily to their mothers, full of excitement and pleasure, and eager to relate the day’s happenings. I have yet to see the child, however young, who has not settled down to nursery routine within 48 hours. Children often come to us with a history of being “difficult” or even unmanageable, and it is a matter of some pride with the matron and her staff that most of these cases resolve themselves before very long, into normal, healthy and well-adjusted members of the community.

All our nurseries are now self-contained and do their own catering — previously Eastway Nursery received its meals from the School Canteen and this was found to be not very satisfactory. A better selection of menus is now possible, and both children and staff are enjoying their meals to the full.

Two of our nurseries still train three girls each for the Diploma of the National Nursery Examination Board and we are never short of applicants for these posts of student nursery nurses, in fact, we receive applications from Birkenhead, Liverpool, North Wales and, of course, Wallasey, and thus we have a long waiting list of girls who wish to take up this work. Our examination results are very satisfactory and we rarely have a failure. We are fortunate in sharing the services of two good tutors with Birken-

head, Bebington and Chester, at the Birkenhead Technical College, where our students go on two full days per week. We also help Birkenhead by accepting their nursery class students for their work with children under two, as Birkenhead no longer have training day nurseries.

All the children in the nurseries are medically examined by the Assistant Medical Officer of Health about once in three months and they are immunised against diphtheria, whooping cough, tetanus and poliomyelitis, if this has not been done before admission.

To sum up, the Wallasey day nurseries are doing a very good job of work, and I hope that the increase in fees which is shortly to come into force, will not deprive too many children of the amenities which they provide."

Details of attendances during the year are as follows:—

Nursery	Number on Register 31/12/60	Number of Places	Average Daily Attendances	
			0—2's	2—5's
Eastway	29	30	4.9	19.0
Central Park	49	50	13.6	19.7
Oakdale	47	50	9.6	24.8

Mother and Baby Homes

There is not a sufficient number of mothers seeking admission to such homes to justify the Council maintaining a Home for this purpose.

Contributions are made where necessary to the maintenance of unmarried mothers and illegitimate children admitted to suitable mother and baby homes.

During 1960 contributions were made in respect of seven cases. The department works in close liaison with the Birkenhead and Wirral Moral Welfare Association and the Chester Diocesan Board of Moral Welfare.

Nurseries and Child Minders Regulations Act, 1948

No applications for registration of premises were received. One Day Nursery was on the register at the end of the year.

Routine inspections were made and advice given.

SECTION 23 — MIDWIFERY SERVICES

Domiciliary Midwifery

Dr. E. I. Grant, Assistant Medical Officer of Health and Medical Supervisor of Midwives makes monthly inspections, and reports as follows:—

“The domiciliary midwifery service has had an exceptionally smooth and uneventful year, during which, thanks no doubt to the mild winter, there has been far less sickness to upset the duty rota. All the midwives have been able to take their off-duty and holidays as arranged, and there have been no unpleasant emergencies to cope with, as there were in 1959.

Three midwives attended Refresher Courses in 1960 and all were enthusiastic about the value of these lectures and clinical demonstrations, which were given by well-known obstetricians and midwives in the various centres.

Two others chose to spend their holidays in Rome, at an International Congress of Midwives, and they described some of the highlights of this interesting visit, illustrated with photographs, at one of our monthly meetings.

The inauguration of these monthly meetings between the seven midwives, the superintendent health visitor and the medical supervisor of midwives, has led, I think, to greater harmony and friendly co-operation. They are held at a different midwife's house each month, and the social atmosphere makes for greater friendliness in the discussions which ensue. Many knotty problems are ironed out over a cup of tea, and home-made delicacies!

The total number of domiciliary deliveries in 1960 has dropped slightly because of the greater number of admissions to Highfield Maternity Hospital, and I think that this has lightened slightly the heavy load of work that our midwives have had to carry in the past few years. It may, however, eventually mean more nursings for them because of the earlier discharges from hospital. We have only had to call on our relief midwife on a few occasions to help out with some of the nursings.

I should again like to record my thanks to Mrs. Schofield, Superintendent Health Visitor, for all the work she has done, and the help she has given me in connection with the day-to-day administration of the domiciliary midwifery service.”

DOMICILIARY CASES							Cases in Institutions
	Doctor not booked		Doctor booked		Totals		
	Doctor present at time of delivery of child	Doctor not present at time of delivery of child	Doctor present at time of delivery of child (either the booked Doctor or another)	Doctor not present at time of delivery of child			
(a) Midwives employed by the Authority	—	3	243	201	447	—	
(b) Midwives employed by Voluntary Organisations:—							
(i) Under arrangements with the Local Health Authority in pursuance of Section 23 of the National Health Service Act, 1946	—	—	—	—	—	—	
(ii) Otherwise (including Hospitals not transferred to the Minister under the National Health Service Act)	—	—	—	—	—	—	
(c) Midwives employed by Hospital Management Committees or Boards of Governors under the National Health Service Act	—	—	—	—	—	1,240	
(d) Midwives in Private Practice (including Midwives employed in Nursing Homes)	—	—	1	—	1	—	
Totals	—	3	244	201	448	1,240	

In 1960 the seven municipal midwives attended 448 cases. Further details are given in the table on page 35.

Medical aid, under Section 14 (1) of the Midwives Act, 1951, was sought in four of these cases.

One midwife notified her intention to practise privately during 1960 and attended one case only.

Maternity Outfits

Maternity outfits are supplied free of charge on request to the Public Health Department, or to the midwife in attendance for all domiciliary confinements.

The number of maternity outfits issued during the year was 481.

Maternity Emergency Unit

The Corporation has an arrangement with St. Catherine's Hospital, Birkenhead, for the use in Wallasey of the Maternity Unit "Flying Squad" for dealing with difficult domiciliary obstetric emergencies.

It was necessary to call upon the services of the Unit three times during 1960.

Maternity Homes

There are no private maternity homes registered in the borough.

SECTION 24—HEALTH VISITING

There was practically a full complement of health visiting staff throughout the year.

The routine work of the Health Visitors has carried on in 1960 as untiringly as ever.

Much time was spent on the care of old people and problem families. The practical help given and sympathetic hearing of the troubles of elderly people were much appreciated and yet seldom recorded in official reports. Special attention is also given to early detection of mental ill health in the home. Some criticism has been made recently, by other branches of Social Workers and in the Report of the Committee on Children and Young Persons, 1960, that the health visitor does not always see the need to refer to her "problems" to the appropriate section of the Local Authority, Hospital, Family Doctor or voluntary organisation. This is not so of the Health Visitors in Wallasey who on the whole have very good relationships with other Social workers and refer a family to the staff of the section who may be able to use their own special skills in helping that case.

The care of mothers and young children is still of primary importance to the Health Visitor and the Maternity and Child Welfare clinics continue to be well attended.

One Health Visitor attended the Oxford Summer School, organised by the W.P.H.O.A. from July 4th to July 16th, 1960. The Health Committee also authorised two of the staff to attend the yearly week-end Refresher Course in Manchester, held each March. Also the expenses for two Health Visitors were paid at the

Annual W.P.H.O.A. Conference held this year in Brighton. The Superintendent Health Visitor and her Staff wish to thank the Committee for making these courses possible.

Since August, 1960 the "Phenistix" urine test has been carried out on all babies between the age 6-8 weeks. In this way a baby suffering from "phenylketonuria" is detected and early dietary treatment commenced so avoiding the development of mental sub-normality.

Tests for ascertaining defective hearing in young children are also being done whenever the Health Visitor considers the child is in the "risk" group.

The following is a summary of work done by the Health Visitors during the year :—

Total visits to children under 1 year	...	...	...	8,632
Total visits to children between 1 and 5 years	...	...	...	12,469
Total visits to Premature Births	...	...	...	192
Total visits re Stillbirths	...	...	...	24
Total visits re Neo-Natal Deaths	...	...	...	22
Total visits re Infant Deaths	...	...	...	11
Total visits re Infectious Diseases and contacts	...	...	...	678
Total visits to Dysentery cases	...	...	...	954
Total visits to Ophthalmia cases	...	...	...	1
Total visits to Day Nurseries	...	...	...	49
Total visits re Immunisation	...	...	...	38
Total visits for Children's Officer	...	...	...	6
Total visits re Adoptions	...	...	...	5
Total visits for Hospital Almoners	...	...	...	23
Total visits to Expectant Mothers	...	...	...	1,188
Total visits to Post-Natal cases	...	...	...	368
Total visits re Tuberculosis	...	...	...	1,582
Total visits to Diabetics, per General Practitioners	...	...	...	2
Total visits re Care of Old People	...	...	...	502
Miscellaneous visits	...	...	...	995

27,741

Ineffectual visits (no response, etc.)	3,114
--	-----	-----	-----	-------

30,855

Attendances at Junior Training Centre for :—

Medical Inspections	...	...	...	...	10
Cleanliness Surveys	...	...	...	...	1

11

Attendances in School by T.B. Health Visitors re B.C.G.

vaccination	...	...	...	...	88
Home visits re B.C.G. vaccination	37

125

Attendances at Consultant Psychiatrists' Clinic	62
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Attendances at Birkenhead Children's Hospital	47
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Attendances by T.B. Health Visitors at Mill Lane Chest Clinic	87
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SECTION 25—HOME NURSING

For the greater part of the year the Staff was at full strength, the establishment being one Superintendent and nineteen Nurses.

Messages continue to be taken at the Nursing Centre from 8 a.m. to 9 p.m. daily and from 9 a.m. to 9 p.m. on Sundays. One Nurse is on duty each evening for emergency calls and late evening visits to very ill patients.

During the year 130 late visits were paid to very ill patients requiring Morphia Injections and patients needing emergency treatment.

The car allowances granted to 3 Nurses using their own cars on duty has resulted in a great saving of the Nurses' time and energy and has contributed very largely to the smooth running of the service. The Nurses are very grateful to the Health Committee for these allowances which have proved so helpful in their work, particularly in the outlying districts of Moreton and Leasowe.

The provision of Nursing Equipment and the Laundry Service for incontinent patients is much appreciated by patients and relatives, and is of valuable assistance to the Nurses in their day to day work.

Towards the end of the year it was evident that a Bathing Attendant for infirm patients would fulfil a great need. This appointment would enable the trained Nursing Staff to devote more time to the ill patients requiring skilled nursing attention.

In 1960 the Minister of Health approved the Queen's Institute Courses of District Nurse Training, and Wallasey was approved as a Training Centre. The practical training of District Nurses is given from the Centre and students attend Liverpool for lectures and tutorial sessions. Students successfully passing the examination qualify for the National Certificate issued by the Ministry of Health in addition to the Certificate of the Queen's Institute of District Nursing. During the year four students completed the course of training, two were successful in passing the examination, and two are now awaiting the results of the examination.

The Superintendent and six Nurses on the Staff are Queen's Nurses plus two awaiting results to qualify for appointment to the Queen's Roll.

In October an invitation was received from the Queen's Institute of District Nursing to the opening of the Institute's William Rathbone Staff College, Liverpool, by Her Royal Highness Princess Alice. The Superintendent and four Nurses were able to attend.

The following is a summary of work carried out by the District Nursing Service in 1960 :—

	Cases	Visits
Medical	1,241	38,811
Surgical	235	7,432
Tuberculosis	43	7,032
Infectious	8	71
Maternal Complications	23	208
Others	114	254
Totals	1,664	48,808
Patients included in above who were 65 years or over at the time of first visit	1,082	33,895
Children included in above who were under 5 years at the time of first visit	24	218
Patients who have had more than 24 visits during the year	434	36,629

The above figures include 9,951 visits paid to 280 patients for the purpose of giving injections only. The comparable figures for 1959 were 6,839 visits to 206 patients.

NURSING HOMES

There were 3 Nursing Homes on the Register at the end of 1960. 21 deaths occurred in the Homes during the year.

8 visits were paid to the Nursing Homes by the Superintendent Health Visitor.

SECTION 26 — VACCINATION AND IMMUNISATION

Smallpox Vaccination

General Practitioners in the borough notified that they had carried out 986 vaccinations and 238 re-vaccinations during the year, compared with 825 vaccinations and 192 re-vaccinations in 1959.

Age at Date of Vaccination	Under 1	1	2 to 4	5 to 14	15 or over	Total
Number vaccinated ...	789	52	35	43	67	986
Number Re-vaccinated	—	2	11	28	197	238

Poliomyelitis Vaccination

Vaccination was again available throughout the year to all persons over six months and under 26 years of age. Early in the year, however, the scheme was extended so as to offer vaccination

for the first time to those persons in the 26-40 age group. "Booster" or third injections were offered to all persons seven months after they had received the second injection.

An intensive publicity campaign was carried out stressing the importance of vaccination. Notices giving details of the facilities for vaccination were displayed in the public libraries and clinics and on the motor buses and ferry boats, etc.

Evening clinics were organised at the Health Clinic, Water Street, Wallasey, and the Health Clinic, Oakenholt Road, Moreton, for the convenience of persons in the 26-40 age group. A large number of persons who received their primary vaccination in 1959 took advantage of these evening clinics to return for their third injection.

There were adequate supplies of British vaccine available throughout the year.

A total of 3796 persons received a primary course of vaccination and 11,680 persons received "booster" injections during the year. Full details are given in the table on page 41.

Of the 3796 persons who received a primary vaccination 2,614 were vaccinated by their family doctor and 1,182 attended the local health authority clinic.

Of the 11,680 persons receiving a "booster" dose 6,348 were vaccinated by their family doctor and 5,332 attended the local health authority clinic.

Number of children vaccinated during
the year—by age group (as at 31.12.60).

<i>Age</i>		<i>Primary Vaccination</i>	<i>Booster Dose</i>
Under 1 yr.	...	66	...
1 yr.	+	640	...
2 yrs.	+	286	...
3 yrs.	+	93	...
4 yrs.	+	83	...
5 yrs.	+	87	...
6 yrs.	+	77	...
7 yrs.	+	65	...
8 yrs.	+	75	...
9 yrs.	+	59	...
10 yrs.	+	70	...
11 yrs.	+	64	...
12 yrs.	+	71	...
13 yrs.	+	61	...
14 yrs.	+	58	...
15 yrs.	+	38	...
16 yrs.	+	30	...
Totals	...	1923	...

POLIOMYELITIS VACCINATION — 1960

	PRIMARY VACCINATION			BOOSTER DOSES		
	Type of Vaccine			Type of Vaccine		Total
	British	Salk	British/ Salk	British	Salk	
Children—Male (16 yrs. and under)	902	16	52	3,447	261	3,708
Children—Female (16 yrs. and under)	878	15	60	3,325	248	3,573
Expectant Mothers	145	4	19	28	2	30
17-25 Yrs and others including Hospital Staff	482	5	31	3,611	99	3,710
Adults 26-40 Yrs	1,154	9	24	631	28	659
Total	3,561	49	186	11,042	638	11,680

Total number of persons receiving primary vaccination — 3,796

Total number of persons receiving Booster vaccinations-11,680

B.C.G. Vaccination (Tuberculosis)

Full details of this service are given on page 47 in the section of the report "Prevention of Illness — Care and After-Care."

Diphtheria Immunisation

During the year 1,853 children received the full course of immunisation against diphtheria, 1,202 being immunised by general practitioners and 651 at the Council's clinics. In addition, 1,289 children who had previously received the full course were given a reinforcing dose, 549 by general practitioners and 740 at the clinics.

The following table gives the number of children who at the 31st December 1960 had completed a course of immunisation at any time before that date, i.e. at any time since 1st January, 1946.

<i>Age on 31.12.60 (i.e. born in year)</i>	<i>Under 1 1960</i>	<i>1—4 1956-59</i>	<i>5—9 1951-55</i>	<i>10—14 1946-50</i>	<i>Under 15 Total</i>
A. Number of children whose last course (primary or booster) was completed in the period 1956-1960.	353	4,421	4,086	1,568	10,428
B. Number of children whose last course (primary or booster) was completed in the period 1955 or earlier.	—	—	1,799	5,114	6,913
C. Estimated mid-year child population	1,780	6,920	16,300		25,000
Immunity Index 100A C	19.83	63.89	34.69		41.71

Further details are given on the table on page 43.

TABLE SHOWING NUMBER OF CHILDREN IMMUNISED—BY AGE GROUPS

Age	1946	1947	1948	1949	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959	1960
Under 1 year ..	37	140	67	86	47	73	86	60	135	134	191	102	188	79	353
1 year +	730	635	865	740	772	762	718	621	770	700	705	667	851	651	950
2 years +	160	78	279	181	229	236	232	172	277	160	177	149	197	151	203
3 years +	91	47	75	77	85	71	71	64	89	97	70	44	77	49	79
4 years +	50	25	33	38	55	46	44	42	62	61	48	26	40	18	63
5 years +	59	32	54	31	42	56	52	48	48	52	54	32	22	19	46
6 years +	45	26	43	23	33	34	65	49	45	46	44	26	22	20	35
7 years +	23	9	7	10	12	11	22	20	20	17	16	15	21	5	28
8 years +	21	8	4	3	5	5	8	6	10	14	10	4	4	4	22
9 years +	15	7	7	6	9	7	5	4	6	11	10	6	4	4	22
10 years +	16	7	11	4	3	6	8	8	10	4	9	3	4	2	11
11 years +	13	5	5	3	3	7	—	20	7	17	7	7	6	4	10
12 years +	13	3	4	1	3	10	3	6	2	8	8	1	8	1	11
13 years +	11	5	3	—	—	2	—	—	—	1	4	1	2	—	6
14 years +	5	1	1	1	1	1	2	—	—	—	3	—	1	—	5
15 years +	1	—	—	—	1	—	1	—	2	2	1	—	—	—	1
Over 16 years ..	1	—	1	2	1	1	4	—	—	1	—	1	2	2	8
Total ..	1,291	1,028	1,459	1,208	1,301	1,328	1,321	1,120	1,483	1,325	1,357	1,084	1,449	1,009	1,853

Total under
5 yrs. of age
at 31/12/60
4,774

Total over
5 yrs. and
under 10 yrs.
at 31/12/60
5,885

Total over
10 yrs. and
under 15 yrs.
at 31/12/60
6,682

Whooping Cough Immunisation

Triple antigen is used for immunisation and a single course of injections thus gives immunity to diphtheria, whooping cough and tetanus.

The following table gives details of the number of persons who received the course of immunisation against whooping cough during the year :—

	<i>Age at date of final injection</i>		
	<i>0-4 yrs.</i>	<i>5-14 yrs.</i>	<i>Total</i>
No. of children who have completed a primary course (normally 3 injections of pertussis vaccine singly or in combination) in the authority's area during the year ended 31st December, 1960	1,619	101	1,720

The total number of persons immunised against the disease in the previous three years was as follows:—

1957	...	920
1958	...	1,376
1959	...	982

SECTION 27 — AMBULANCE SERVICE

The day-to-day administration of the ambulance service is carried out by the Chief Fire Officer, subject to the overall control of the Medical Officer of Health.

The ambulance vehicles are housed at the Central Fire Station, Manor Road, Wallasey. To serve the needs of the Moreton area, two vehicles are despatched each day to the Super Garage, Moreton. All vehicles are fitted with radio communication, and this has undoubtedly led to greater efficiency in the service, and a considerable saving both in time and mileage. Arrangements continue to be made for long distance cases to be conveyed by train so relieving the pressure on the service.

In view of the ever-increasing demands on the service, an additional stretcher case vehicle was added to the fleet of ambulances during the year. The vehicular strength is now as follows:—

1. Seven ambulances, each capable of conveying 2/4 persons in emergency;
2. Two omni-coaches for sitting cases, each capable of carrying 13 persons;
3. One car for long distance journeys.

Twenty-four driver/orderlies are employed on a rota system. In addition three communication clerks are employed on telephone duties.

AMBULANCE SERVICE—NUMBER OF CASES CONVEYED—1960

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total
Maternity ..	71	101	74	57	76	66	58	47	76	58	74	75	833
Mortuary ..	8	7	8	6	4	—	—	—	—	—	3	7	43
Sudden Illness ..	27	43	42	42	4	47	38	39	44	33	33	44	436
Works and Street Accidents ..	55	100	64	133	182	223	169	172	141	89	131	132	1,591
Mental ..	22	44	15	5	5	22	10	12	14	8	17	7	181
Infectious Diseases ..	4	18	16	11	14	4	8	17	7	8	10	4	121
Malicious False Alarm and False Alarm ..	—	—	—	—	—	—	—	—	2	1	1	—	4
Other Cases ..	2,580	2,444	2,897	2,652	3,065	2,832	2,479	2,360	2,674	2,581	2,639	2,484	31,687
Totals ..	2,767	2,757	3,116	2,906	3,350	3,194	2,762	2,647	2,598	2,778	2,908	2,753	34,896
Mileage ..	12,257	12,336	14,601	12,728	41,203	13,988	14,069	12,212	13,381	13,778	13,132	12,584	158,279

All vehicle repairs, other than major overhauls, are carried out in the workshops at the Central Fire Station, and a mechanic is employed by the Health Committee, specifically for work on the ambulance fleet. In addition, the mopeds used by the Home Nursing Service are repaired and serviced in the workshops.

The number of cases conveyed again shows an increase over the previous year—34,896 compared with 33,073 in 1959. The following details of cases carried indicate the ever-increasing demands made on the service, which at peak periods is stretched to the limit :—

1947	...	3,854	1959	...	33,073
1950	...	21,385	1960	...	34,896

The total mileage covered during the year was 158,279 compared with 157,959 in the previous year. Further details are given in the table on page 45.

Gas and air (analgesia) outfits are stored and maintained at the ambulance depot, and are available for use by the domiciliary midwives as required.

SECTION 28 — PREVENTION OF ILLNESS, CARE AND AFTER-CARE

Tuberculosis

	1960	1959	1958	1957	1956	1955	1954
No. of Primary Notifications	78	84	77	66	83	91	95
Pulmonary	68=45 men			19 women		4 children	
Non-pulmonary	10= 4 men			6 women			

Classification of non-pulmonary cases :

Renal Tract	...	...	2	Urinary	...	...	...	1
Glands in neck	...	...	3	Pericarditis	...	...	...	1
Endometritis	...	...	2	Cervical Adenitis	...	...	...	1

Table of Primary Notifications &c. :

	Notifications		Deaths		Death Rate Per 1000
	Pul.	Non Pul.	Pul.	Non Pul.	
1960	68	10	10	2	0.116

No. of Notified Cases of Tuberculosis on Clinic Register :

1st January, 1960	...	...	...	...	...	...	1,035
31st December, 1960	...	...	...	...	...	...	1,067
Transfers from other areas	...	...	...	...	...	...	16
Lost sight of cases returned	...	...	...	...	...	...	4
New cases diagnosed during the year	...	...	...	...	...	...	78
Total visits by Health Visitors	...	...	...	...	...	...	1,565

Prevention :

No. of new contacts examined during 1960	...	...	...	...	...	...	305
No. of new cases diagnosed during 1960	...	...	...	...	...	...	78
Contact Rate	...	...	...	...	...	...	4.04
No. of new cases detected by contact examination	...	...	...	...	...	...	2
No. of cases detected by School Contact Examination	...	...	...	...	...	...	—
Home Nursing Service treated	...	...	...	...	...	...	41
B.C.G. Vaccinations	...	...	...	...	...	...	194

The number of notifications has returned to a lower level after the slight boost it received from the Liverpool Mass Radiography Campaign in 1959. Out of 78 notified cases there were 35 male and 8 female cases over 45 years of age. The number of cases in the over 45 age group is proportionately very large. It is composed of men who have to work and support families, women who run their own homes and an older group who are often Grandparents. These persons are very difficult to detect because they are busy or too old to accept X-ray particularly M.M.R., which is, to them, a new fangled idea. It is significant that 7 of this group were found to have tuberculosis *after* death. Considering the number of bacilli which must have been disseminated by these undetected cases it is obvious that the fight against tuberculosis must go on and be intensified. Firstly, cases must be detected by contact follow-up, M.M.R. examination and examination of patients sent by General Practitioners to the Clinic. Secondly, the protection of susceptible age groups by B.C.G. vaccination, done for adolescents in the School and for contacts in the Clinic, must be continued and expanded.

Prevention

The number of contacts examined per new case is 4.04. Considering the small size of families in Wallasey this is satisfactory. In addition there were 280 contacts of 93 children who were Mantoux positive at school examinations. No cases of active tuberculosis were found. The School Health Service must be congratulated on the efficiency of its work and the thoroughness of its examinations in this respect.

Care

In addition to helping with the B.C.G. campaign in the Schools, the Health Visitors have made 1565 visits this year and continued to be of great assistance in the work of the T.B. Clinic.

The Home Nursing Service have treated 41 patients in their own homes. Many tributes to their efficiency and kindness have been received.

Families receiving clothes, etc.	60
Housing defects reported by Health Visitors	16
No. of patients receiving milk	13
No. of cases re-housed	2
Referred to Education Dept.	4
Home Helps	2
Children Mantoux positive at School	93
No. of Contacts attending through above	280
No. of Mantoux positive children at School who attended Clinic	78
Free School Meals	2

Vaccination of Schoolchildren with B.C.G.

The table on page 48 shows details of this work for the years 1955 to 1960 inclusive. As will be seen, the number of children vaccinated has increased progressively year by year. Moreover, the incidence of Mantoux positive children—which is an indication of

the prevalence of tuberculosis infection in the community—has continued to fall from 18.8% of the children tested in 1955 to 7.3% of the children tested in 1960.

B.C.G. Vaccination—School Children :

No. of children—	1955	1956	1957	1958	1959	1960
offered B.C.G. vaccination	1,085	1,315	1,398	1,545	1,783	1,673
accepting B.C.G. vaccination	851	927	1,030	1,121	1,215	1,273
Mantoux tested ...	821	917	1,013	1,084	1,168	1,232
found Mantoux positive ...	154	140	148	106	100	90
Percentage of children—						
Mantoux positive ...	18.8%	15.3%	14.6%	9.8%	8.5%	7.3%
No. of children—						
found Mantoux negative ...	666	775	869	958	1,064	1,142
vaccinated with B.C.G. vaccine ...	660	769	861	946	1,061	1,136
Re-Tests after 1 year						
No. of children—						
Mantoux re-tested ...	269	583	668	1,112	697	53
found negative ...	7	20	26	13	6	4
Percentage of children—						
Mantoux negative ...	2.6%	3.4%	3.9%	1.0%	0.8%	0.9%
No. of children—						
re-vacc. with B.C.G. vacc.	—	—	15	5	4	4

Provision of Nursing Equipment

There has continued to be a heavy demand for articles of equipment on loan. A small charge is made varying from 6d. per week for the smaller articles such as back rests and bed-pans, to 3/6d. per week for Dunlopillo mattresses. In cases of hardship no charge is made.

A stock of equipment is stored at a central depot, with the exception of a small number of articles which are kept at the Nursing Centre, 86a, Penkett Road, Wallasey, for emergency use.

In 1960 a total of 901 articles were issued on loan as follows :—

Air-rings ...	96	Mackintosh sheets ...	178
Back rests ...	128	Self-lifting pole ...	4
Bed pans ...	212	Tripod Sticks ...	19
Bed Tables ...	4	Male Urinals ...	37
Bed with Lifting Pole	—	Female Urinals ...	9
Commodos ...	135	Wooden Blocks ...	—
Crutches ...	1	Wooden Bed Blocks ...	—
Dunlopillo Mattress ...	2	Oxford Hoist ...	2
Invalid Chairs ...	58	Oesophagus Box ...	1
Knee cages ...	14	Special Bedstead ...	1

Domiciliary Laundry Service for the Incontinent Chronic Sick

This service commenced at the beginning of September, 1959. Nine sheets are initially left at each home and the soiled sheets are replaced with clean on alternate days.

The following are details of the service during 1960 :—

No. of sheets issued during the year ...	8,605
No. of cases to whom sheets issued ...	72
No. of cases carried forward to 1961 ...	17

The scheme is working satisfactorily and is much appreciated by patients and the relatives of those being nursed at home.

Health Education

Health Education in this borough is conducted primarily by the Superintendent Health Visitor and her staff, although members of the staff in other sections of the department make a worthwhile contribution in this field.

The most valuable approach to health education is still personal communication, that is, good home visiting and small discussion groups, whether in the home or clinic. The health visitor is frequently well-known to the family and so is afforded a unique opportunity of advising mothers on matters relating to health education, whether it be on the advisability of having an injection against poliomyelitis, the danger of not having a fireguard, or the proper dose of cod liver oil for the baby.

The value of good, up-to-date pamphlets and leaflets must not be overlooked. Copies of the publication "Better Health," the official journal of the Central Council for Health Education, are purchased each month and distributed free from the Public Health Department, the various clinics, the Education Department and the offices of the Wallasey Executive Council. Posters are displayed in all the child welfare and minor ailments clinics and much individual teaching is done, leaflets and pamphlets being distributed to expectant mothers.

The Superintendent Health Visitor and her staff have taken every opportunity of giving talks to women's organisations on health education subjects, including "Good Dental Care" and "Home Accidents and their Prevention."

It was envisaged in 1960 that a Mothers' Club should be commenced in the Moreton area. At the time of writing the club is now firmly established, and meets every other Thursday evening. Talks and topics discussed by the mothers have included "The Mental and Physical Growth of Children," "Physiotherapy," "Household Hints," etc. Attendances have been good.

The Health Committee have been very concerned during the year about the condition of children's teeth. It was resolved that "the Medical Officer of Health do everything possible to bring this matter to the attention of the public." A campaign was inaugurated, articles appeared in the local press and several thousand leaflets and posters which were obtained from the General Dental Council, Fruit and Vegetable Council, and Central Council for Health Education were distributed from the various clinics, Corporation departments, in the schools, libraries, etc. The Principal Dental Officer has lectured at several schools in the borough on the subject of Dental Hygiene. As mentioned in the foreword and page 70 of this report, considerable concern was expressed by the Health Committee regarding the effect of ice lollies on children's teeth. Several samples were analysed and in view of the high acid content of the lollies, the matter was referred to the Health Committee of the Association of Municipal Corporations with a view

to the introduction of legislation to prevent the sale of harmful types of ice lolly.

1960 was Mental Health Year. The local authority readily supported Mental Health Week. Every opportunity was taken of bringing to public notice the changing attitude towards mental illness and mental sub-normality. Booklets and pamphlets were distributed, and the Junior Training Centre, Hale Road, was open for public inspection. Articles appeared in the local press and several talks have been given to organisations in the borough by mental welfare officers to provide an up-to-date understanding of mental health problems. As mentioned in another section of this report, the number of further requests for a speaker indicate the success of this part of the department's Health Education programme.

Exhibitions on different health aspects were given in the two health clinics, i.e. Moreton Clinic and Water Street. Immunisation and poliomyelitis vaccination propaganda and "fire prevention in the home" were some of the topics which have been displayed. Use has been made of flannelgraphs and the projector to show film strips on many health matters.

The medical and health visiting staff have visited schools in the borough and have lectured on "Smoking and Lung Cancer" and the film "Facts and Figures" on this subject, which was obtained from the Central Film Library has also been shown.

During the year, two publications have been widely distributed. The "Health and Welfare Services Handbook" outlining the activities of the Health and Welfare sections of the department, and illustrated with photographs, has been well received, and several hundred copies were distributed in the clinics, from the Health Department, local hospitals, Wallasey Executive Council, etc. The Wallasey book on "Clean Food" has also been distributed to the public.

The Chief Public Health Inspector and his staff have given talks on several occasions on the subjects of "Food Hygiene" and also "Clean Air." Much propaganda has been disseminated and literature distributed in connection with the latter, the Council having resolved that the borough should be smokeless within seven years. A mobile exhibition illustrating the use of smokeless fuels visited the borough.

Use has been made of the poster boards at Liscard Road and Moreton to display posters on several topics.

1960 was Charter Year to celebrate the fiftieth anniversary of the granting of the Charter of Incorporation to the Borough. An exhibition attended by several thousand persons was held in the Civic Hall. The various activities of the Health Department were illustrated by figures, models, documents, etc.

The domiciliary midwives hold afternoon and evening ante-natal clinics twice weekly. These clinics are well attended and the staff take every opportunity of advising mothers on matters of Health Education.

Several topics have been displayed in the window of the Welfare Foods Distribution Centre in one of the main shopping areas of the borough.

Further meetings of the Merseyside Cancer Education Committee were held and the proposals for an education campaign on Merseyside regarding cancer were agreed. A full time officer is to be appointed and a contribution at the rate of $\frac{1}{2}$ d. per head of population is to be made in support of this aspect of Health Education in the area.

Chiropody Service

In accordance with the recommendations of Circular 11/59 Local Health Authorities were empowered to establish or extend a chiropody service under Section 28 of the National Health Service Act, 1946.

On the 22nd March, 1960 the following scheme regarding a proposed chiropody service in this borough was approved by the Ministry of Health: —

“ (a) The Local Health Authority will, either itself or through voluntary bodies, make arrangements to assist (a) male persons who are over the age of 65 and female persons who are over the age of 60, (b) physically handicapped persons, and (c) pregnant women, to obtain chiropody treatment and will consider extending the provision to other classes should this be deemed desirable.

(b) Treatment will be carried out either at the premises of the several chiropodists holding the qualification laid down in Section 3 of the National Health Service (Medical Auxiliaries) Regulations, 1954, at premises occupied by the Authority or appropriate voluntary societies, or in the patients' own homes ; arrangements will be made for transport where appropriate.

(c) The Authority will, if necessary, itself employ chiropodists holding the required qualifications.”

Applicants for treatment must, in the first instance, obtain a certificate from their family doctor. An authorisation card is then issued from this department to the applicant to be presented to the approved chiropodist of his/her choice. There is no charge for treatment to persons in receipt of National Assistance, or whose sole income is the statutory old age pension. The charge for other beneficiaries is in accordance with the scale approved by the Council.

Fees payable to the chiropodists are 6/- for surgery treatment and 8/6d. for domiciliary treatment. It was agreed that in those cases where the full fee is payable by the patient, that such payments should be outside the scheme administered by the local authority.

A chiropody service sub-committee considered the implementation of the scheme at a meeting held on the 1st December, 1959 and recommended to the Health Committee that the eight qualified local chiropodists should be invited to participate, and that the treatment be provided at their surgeries. It was also

recommended that domiciliary treatment be provided in appropriate cases. It was decided not to operate special sessions in the local authority's own clinics as it was felt that patients could, under the recommended scheme, visit a chiropodist of their own choice, near their own home.

The scheme commenced on the 9th May, 1960 and the following are details of the treatments, etc. given since that date to 31st December, 1960 :—

(a) Number of patients registered	...	...	...	...	714
(b) Number of treatments given :—					
(i) Old Age Pensioners	...	...	...	2,694	
(ii) Physically Handicapped	...	...	...	41	
(iii) Expectant Mothers	...	...	...	Nil	
			Total	2,735	

Venereal Disease

The following table shows the number of Wallasey patients receiving treatment for the first time at various centres during 1960 :—

	<i>Syphilis</i>	<i>Gonorrhoea</i>	<i>Other conditions</i>	<i>Total</i>
Mill Lane Hospital, Wallasey ...	—	3	25	28
St. James Hospital, Birkenhead ...	8	14	65	87
Royal Infirmary, Liverpool ...	1	2	19	22
Mill Road Clinic, Liverpool ...	—	1	1	2
Seamen's Dispensary & V.D. Clinic, Liverpool	—	6	65	71
	9	26	175	210

Although the total number of cases treated in 1960 shows an increase of 25 compared with the previous year, there is not the marked increase in the incidence of the disease in Wallasey which is evident in many of the large towns throughout the country.

Plastic notices are fixed in all the conveniences in the borough and on the ferry boats giving details of the centres where, in the strictest confidence, treatment can be obtained. The advisability of obtaining early treatment cannot be over emphasised.

SECTION 29 — DOMESTIC HELP SERVICE

Mrs. Malcolm Falla, Organiser, reports as follows :—

“The above service continues to be of great help in times of sickness and difficulty. The number of aged persons needing help increases year by year, and many of the old people are quite unable to look after themselves. Caring for so many old persons, who

require help continuously, depletes the number of helpers available for emergency and maternity cases. If the service did not exist many old persons, living alone, would have to go into hostels or hospital, and I sincerely think that their declining years are made happier by the knowledge that a helper is there to care for them. Any deterioration in health is reported and the patient's doctor advised accordingly. The service does much to avert any feeling of loneliness and abandonment. In some cases the families of old people tend to evade their obligation and responsibilities and expect the service to take over. This is not the function of the home help service.

Statistics for 1960

	<i>Mat</i>	<i>T.B.</i>	<i>O.A.P.</i>	<i>Others</i>	<i>Total</i>
Applications received	77	1	249	77	404
Applications accepted	70	1	236	76	383
Applications cancelled	7	—	13	1	21
No. of cases helped ...	70	3	349	76	498
No. of hours worked ...	4,086 $\frac{3}{4}$	42 $\frac{1}{2}$	69,093 $\frac{1}{4}$	7,550 $\frac{1}{4}$	80,772 $\frac{3}{4}$
No. of helpers on 31.12.60	—	—	—	—	53

SECTIONS 28 and 51 — MENTAL HEALTH SERVICES

Introduction

Under Part III of the National Health Service Act, 1946, the Local Authority is responsible for the ascertainment of mental disorder, for arranging the admission of patients to psychiatric hospitals and for work in the field of prevention, care, and after-care in the community. Part II of the Mental Health Act, 1959, which came fully in force in 1960, adds to these duties, functions relating to the provision of training centres, the provision of residential accommodation and increases the emphasis in the care of the mentally disordered within the community. The general principle of the new Act is that there should be a reorientation in the field of Mental Health away from institutional care and towards care within the community. What is now called for, therefore, is a great and continuing expansion of Local Authority Mental Health Services, and details of this Authority's proposals which were approved by the Ministry of Health are given on page 61.

Administration

The Medical Officer of Health is the Administrative Officer and he, together with the other three medical officers of the Local Health Authority, is approved under the provisions of Section 28 (2) of the Mental Health Act, to provide the medical recommendations required for the compulsory admission of mentally disordered persons to hospital. In practice the Local Health Authority Doctors give recommendations in cases of sub-normality and severe sub-normality but not in cases of mental illness or psychopathy.

Five Mental Welfare Officers are now employed to carry out the statutory duties of the Local Health Authority. This is an increase in the establishment of one Officer, Mr. J. Houghton, being appointed during the year. Mr. Houghton commenced duty on the 1st December, 1960. One quarter of the time of four of these Officers is allocated to the Welfare Committee.

During the year one Mental Welfare Officer, Mr. Wall, attended the Mental Health Refresher Course organised by the National Association for Mental Health at Leeds University. This valuable course consists of a month's residence at Leeds followed by twenty weekly seminars held at Manchester and a final week in residence at Leeds. Four of the five Mental Welfare Officers have now attended this course.

New Progress and Plans

During the year further improvements and alterations were made to the Junior Training Centre and an additional Assistant Supervisor was appointed. The number of children on the Register continues to increase; at the end of December, 1958, there were 59 children enrolled, at the end of 1959, 70 children, and at the end of 1960, 81 children.

Plans are going forward for the establishment of an Adult Training Centre which will also incorporate eventually, a sheltered workshop. As in the case of the Junior Training Centre the Adult Centre will provide facilities for suitable cases from Birkenhead and initially it is estimated that about 60 persons (30 from each Town) will attend. In the planning of the Centre, there has been full co-operation between the Health Committee and the Wallasey Society for Mentally Handicapped Children who are deeply interested in the project, and who have raised a large sum of money to this end.

Plans are in a more advanced stage for the provision of a Hostel to accommodate 36 mentally disordered persons who are no longer in need of full hospital care. The Hostel will be in two wings providing accommodation for 24 and 12 persons respectively. This is because there will be, very broadly, two categories of patient. One, probably the larger, will be chronic cases without hope of full recovery, and the other will be patients who for one reason or another cannot return at once to the community, but who will be expected to do so after a period of re-habilitation. This wing will be a "half-way hostel" between hospital and the full responsibilities of life in the community.

It is also the intention to provide room in the hostel for a psychiatric social club for people living at home. It has been found elsewhere that such a club can be a useful support to people discharged from hospital and can help them acquire increased confidence in themselves and in their ability to make contacts with others.

Preliminary plans for this Hostel have been approved by the Minister of Health, and the site has been earmarked in Sandbrook Lane, Moreton.

The home visiting services have been improved by the appointment as mentioned previously, of an additional Mental Welfare Officer. The granting of car allowances to three of the Officers has also improved this service.

A valuable development in the service has been the inauguration of informal meetings between the Medical Officer of Health, the Mental Welfare Officers, and Dr. James (Consultant Psychiatrist) which commenced in October, 1960, and which takes place once a fortnight. At these meetings matters of common interest and individual cases are discussed. Case Conferences are held every two months at Deva Hospital, and these are attended by the Medical Officer of Health and Mental Welfare Officers whenever possible.

General Observations

The Statistics for the year are in two parts, those under the Lunacy Act, 1890 and from the 1st November, 1960, those under the Mental Health Act, 1959.

The Justice of the Peace now has no functions or responsibilities regarding the compulsory treatment of mental disorder—and this responsibility now rests primarily on the patients' General Practitioner, the Consultant Psychiatrist, the patients' next of kin, and the Mental Welfare Officer.

The large increase in the number of voluntary patients (293 as compared with 168 last year) is mainly due to the transfer of certified patients to voluntary status, at the Deva Hospital, Chester. This has been in accordance with the general policy of removing restrictions which are not absolutely necessary, and thus promoting an atmosphere of freedom, where therapy and treatment can now be more effective. Many of the Wards at the hospitals have been unlocked, and the "open door" principle is a further noteworthy advance in changing the emphasis from custody to treatment and recovery. Two new psychiatric hospitals were opened during the year, namely Kingswood Hospital, Helsby, and Moston Hospital, Chester.

Whilst the psychiatrists lead the change in attitudes to mental illness, the real change must be based on an informed public opinion, and several talks have been given to local organisations by the Mental Welfare Officers, in an effort to provide a better understanding of mental health problems. These have coincided with "World Mental Health Year" and the fact that further requests for a speaker have always followed a talk perhaps show the public interest in mental health and the success of this part of the Department's Health Education programme.

Seventeen Doctors were approved by the Wallasey Local Health Authority during the year as having special experience in the treatment and diagnosis of mental disorder. Seven are local General Practitioners, six are Consultant Psychiatrists, and four are members of the Department's medical staff.

Prevention of Mental Illness

The prevention of mental illness is largely carried out by health education, and the policies of other social agencies in their understanding of the effect on mental maturity of environmental experiences. Where a punitive attitude is expressed by a social agency by blaming the problem family for its own troubles, this lack of help usually accelerates the disintegration of an already weak

family unity and the children who are the most vulnerable persons in the family may suffer from mental illness in later life.

Problem families thus tend to reproduce themselves in the next generation and cost the community an expense out of all proportion to their numbers.

In Wallasey I am glad to say that most of the voluntary and statutory agencies which affect family life, follow an enlightened policy, and the influence which the Public Health Services have in the Town in the prevention of mental illness, is perhaps shown by this increased understanding. No opportunity is lost in contacts with other social workers to propagate a constructive approach to mental health problems, in the belief that mental health is "Everybodys' Business."

After Care

The domiciliary visits by the Mental Welfare Officers during 1960 were :—

Acute Psychiatric Cases	1,538
Prevention—Care—After-Care Visits	1,266
	<hr/>
Total =	2,804
	<hr/>

This is an increase of 816 visits over last year, 616 of these visits being after-care visits. This shows not only an increased readiness on the part of patients and their relatives to receive help but an increase in the community care work by the Mental Welfare Officers. The provision of car allowances has enabled them to spend more time in the patients' homes rather than in travelling by Public Transport.

The increase may also show an improvement in the quality of the casework being done, and whilst this is difficult to measure, the trust and confidence shown by the patients in their willingness to receive help may be a guide to the quality of the casework.

Mental Treatment Act, 1930

Section 1 (Voluntary Patients)

	<i>Male</i>	<i>Female</i>	<i>Total</i>
Deva Hospital	104	189	293
Birkenhead Hospital	17	29	46
Kingswood Hospital	4	—	4
Winwick Hospital	1	1	2
Rainhill Hospital	1	—	1
Saxondale Hospital (Stoke/Trent)	—	1	1
Haydock Lodge	—	4	4
Whiston Hospital	—	3	3
	<hr/>	<hr/>	<hr/>
	127	227	354
	<hr/>	<hr/>	<hr/>

Section 5 Mental Treatment Act

(Temporary Patients)

Deva Hospital	—	1	1
	<hr/>	<hr/>	<hr/>

Lunacy Act, 1890

				Male	Female	Total
<i>Section 20 (3 day Order)</i>						
Deva Hospital	...	...	...	18	32	50
Birkenhead Hospital	...	...	...	34	27	61
Sefton Hospital	...	...	...	—	5	5
				<hr/> 52	<hr/> 64	<hr/> 116
<i>Section 21 (14 day Order)</i>						
Deva Hospital	...	...	...	<hr/>—	<hr/>1	<hr/> 1
<i>Section 16 (Certified)</i>						
Deva Hospital	...	...	...	14	17	31
Birkenhead Hospital	...	...	...	1	2	3
Winwick Hospital	...	...	...	—	1	1
				<hr/> 15	<hr/> 20	<hr/> 35
<i>Informal Patients</i>						
Deva Hospital	...	...	...	7	6	13
Birkenhead Hospital	...	...	...	3	11	14
Moston Hospital	...	...	...	—	1	1
Westminster House (S.D. Ward)	...	...	...	18	—	18
				<hr/> 28	<hr/> 18	<hr/> 46

Mental Health Act, 1959*Section 29 (Emergency Admission for Observation)*

Deva Hospital	...	...	...	3	4	7
Birkenhead Hospital	...	...	...	—	3	3
				<hr/> 3	<hr/> 7	<hr/> 10

Section 25 (Admission for Observation)

Deva Hospital	...	...	...	1	1	2
Birkenhead Hospital	2	4	6
				<hr/> 3	<hr/> 5	<hr/> 8

Section 26 (Admission for Treatment)

Deva Hospital	<hr/> —	<hr/> 2	<hr/> 2
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SUB-NORMAL AND SEVERELY SUB-NORMAL PERSONS

Total number of Sub-normal and Severely Sub-normal Persons on the Local Health Authority's Register (excluding children

being dealt with by the Education Authority) on 31st December, 1960 :—

In Institutions	130
Under supervision in the Community	137
	<hr/>
Total	267
	<hr/>

(a) In the Community

During the year there would seem to have been a great improvement in the general attitude to mental disorders of all kinds, and an increasing desire to understand. This naturally leads to a multiplicity of questions which frequently indicate a genuine quest for knowledge rather than a superficial curiosity. The regular routine visits which are paid to the homes of all sub-normal and severely sub-normal patients on the Authority's Register give opportunities for stimulating this interest and as far as possible answering or suggesting possible answers to the questions raised. Frequently too the growing interest can be further stimulated by posing other questions and tentative theories thereby gradually enticing the parent, relative, neighbour or friend to seek further knowledge from suggested books, pamphlets, periodicals, etc., on the subject. Naturally such visits tend to take up more time than the more formal check visit, but undoubtedly they are of much greater value. The changing attitude is also reflected in the desire of parents of very young children to receive visits and advice at a much earlier stage, rather than the older attitude of concealment. This is again to be noticed in parents' enthusiastic enquiries regarding their child's early admission to a Training Centre. This was particularly evidenced by the fact that when attendance at Junior Training Centres became compulsory on 1st November last, there were only four children suitable for such training who were not already in attendance. These four commenced attending after pressure was brought to bear. It is of course infinitely preferable that a parent should voluntarily seek admission for his child particularly as these children are extremely sensitive to home attitudes, and any objections on the part of the parents are invariably reflected in the child being unco-operative and antagonistic at the Centre, which inevitably prevents him from deriving full benefit from the training and facilities available to him.

The following statistics show that a total of 699 visits were made by Mental Welfare Officers to the homes of sub-normal and severely sub-normal persons in addition to those made to the mentally ill. The number attending the Junior Training Centre has increased from 32 to 38 whilst 7 children are now attending Spastic Units for treatment at Wallasey and Birkenhead, an increase of 2 on last years' figures. A similar increase is shown in the number of these patients who have been allowed to attend the classes for Physically Handicapped at Penkett Road and Moreton, which has risen from 3 to 9.

As in previous years every effort has been made to relieve the pressure and strain so inseparable from the presence of mental handicap within the home by arranging periods of short-term care, but as it is usually quite impossible to give any definite assurance

that help will, in fact be forthcoming, particularly at any specific date, it is impossible for the family to make any holiday bookings. Nevertheless a total of 15 patients have been admitted for an average period of 3 weeks as against last year's 12 admissions. It has again been possible to arrange the necessary emergency admissions without the necessity of applying to the Committee for financial assistance towards the cost of maintenance in a private Home, but this is largely due to the goodwill and excellent co-operation between General Practitioners and the Medical Superintendent of a local hospital.

A further 13 patients have been discharged from Order but only two have actually left hospital, the others remaining on an informal basis. On the other hand 9 patients have been admitted informally and those who have been on the Waiting List a considerable time are now gradually being admitted.

(b) In Institutions

Liaison is still maintained between parents and hospitals and reports on home circumstances, etc., are sent to the hospitals as requested.

Particulars of Sub-normal and Severely Sub-normal Persons notified during the year :

Males	11
Females	9
	—
Total	20
	—

Cases admitted to short-term care during the year : (2-8 weeks)

Males	5
Females	10
	—
Total	15 persons for an average of 3 weeks
	—

Cases admitted to long-term care during the year :

Males	4
Females	5
	—
Total	9
	—

Cases awaiting Institutional Care :

	<i>M</i>	<i>F</i>	<i>Total</i>
In the Community	8	3	11
In hospital or home	5	2	7
	—	—	—
	13	5	18
	—	—	—

Cases discharged from Order :

Males	9
Females	4
	—
Total	13
	—

Cases discharged from hospital :

Females	2
---------	-----	-----	-----	-----	---

Total number of visits to Sub-normal and Severely Sub-normal :

Visits	...	...	...	...	699
Cases	...	...	...	...	562

Total number of Sub-normal and Severely Sub-normal attending Junior Training Centre (Hale Road):

Males	...	...	...	...	20
Females	...	...	...	...	18
				Total	38

Sub-Normal and Severely Sub-normal awaiting Training at Senior Training Centre :

					<i>M</i>	<i>F</i>	<i>Total</i>
Sub-normal	...	...	...	...	12	12	24
Severely Sub-normal	...	...	...	...	8	5	13
					—	—	—
					20	17	37
					—	—	—

Total number of sub-normal persons attending classes for physically handicapped :

					<i>M</i>	<i>F</i>	<i>Total</i>
Moreton	...	...	...	...	3	1	4
Penkett Road	...	...	...	...	2	3	5
					—	—	—
					5	4	9
					—	—	—

Junior Training Centre

The Centre now has accommodation for approximately 90 children and under arrangements with the County Borough of Birkenhead, severely sub-normal children from that authority attend the centre.

In order that as much individual attention as possible can be given to each child, the classes are sub-divided into groups of approximately 12 children.

The numbers of children attending have increased and at the end of December, 1960, 38 Wallasey children and 46 children from Birkenhead were on the register, compared with 31 and 39 respectively in the previous year. It has not been necessary to resort to the use of powers under the Mental Health Act regarding compulsory attendance.

The staff was increased by an additional assistant supervisor. One of the staff attended a refresher course in Manchester.

The ages of the children vary from 5 years to 16 years. In addition, there are several over 16 years, who have been grouped into a special class pending the provision of an Adult Training Centre.

The Centre is open five days per week—Monday to Friday—from 9 a.m. to 4 p.m. and is closed for one month in the summer and approximately four weeks during the remainder of the year.

Special buses convey the children to and from the Centre.

The children are instructed in various handicrafts and hand work, including basket and rug making, mop making, embroidery, simple sewing, painting, papier mache work, cardboard modelling and woodwork. Musical activities include maypole and country dancing. Physical training is also carried out.

The Annual Sports Day was again held at the Scouts Field, Overchurch, and the Annual Outing to Southport was again much enjoyed by the children.

The centre was open during "Charter Week" for parents and friends to visit and also for public inspection during Mental Health Week. Over 100 persons visited the centre and saw the children carrying out their usual activities.

PROPOSALS FOR THE EXPANSION AND DEVELOPMENT OF THE MENTAL HEALTH SERVICES

(Approved by the Ministry of Health)

1. Introduction

This outline is divided into two parts A and B, of which Part A (*italics*) is a statement of the services which are already being provided. This statement is not part of the approved proposals but is supplied because it may be helpful to those who read the proposals. Part B consists of the local health authority's approved proposals and contains a description of their plans for the period up to April, 1963, and a further general statement of their subsequent intentions.

2. General

A. The proposals in sub-paragraph B are additional to the arrangements already approved by the Minister relating to the prevention of mental illness, the care of persons suffering from mental illness or mental defectiveness, and the after-care of such persons under Section 28 of the National Health Service Act; existing arrangements for carrying out duties under the Lunacy and Mental Treatment Acts, 1890-1930, and the Mental Deficiency Acts, 1913-1938, continue in operation until the relevant sections of these Acts are repealed on dates appointed by the Minister by order under Section 153 of the Mental Health Act, 1959; the proposals relating to duties under the repealed sections will then cease to have effect.

B. The authority will make appropriate arrangements for the provision of services to meet the needs of the mentally disordered living in the community and will make the services known to and available to those who are in need of them. In particular, they will provide, or cause to be provided junior training centre(s), adult training centre(s), home training, residential accommodation, social clubs, and a home visiting service.

3. Organisation and Staff of the Services

A. The following is, in outline, a description of the existing organisation and staffing arrangements:—

Organisation :

Matters of policy are submitted to the Mental Health Sub-Committee. All recommendations of that Committee are referred to the Health Committee, the resolutions of which are subject to approval by Council. The Medical Officer of Health is responsible for the day-to-day administration of the service.

Staffing :

Four Medical officers of the authority are approved to give medical certificates in accordance with the provision of sections 3 and 5 of the Mental Deficiency Act, 1913. Three duly authorised officers and one mental health worker are employed. All four act as social workers in the fields of prevention and after-care. One-third of the time of the duly authorised officers is allocated to welfare committee duties under the National Assistance Act, 1948.

Clerical duties are undertaken by the staff of the health and welfare sections of the department of the Medical Officer of Health.

One supervisor and four assistant supervisors are employed at the Junior Training Centre for Mental Defectives in addition to domestic staff.

Health Visitors encourage the promotion of good mental health in the community.

Staff Training. Advantage has been taken of the facilities afforded by the National Association for Mental Health for staff training. Three of the Mental Health staff have attended the course consisting of a month's residence in Leeds, 20 weekly sessions in Manchester, and a final week in residence in Leeds.

Staff from the Junior Training Centre have attended suitable courses organised by the Association. A health visitor has recently attended a Mental Health Course conducted by the Royal College of Nursing.

Links with Hospitals. There are no joint appointments. Staff of the local authority work in close liaison with the consultant psychiatrists, and hospital social workers, and attend the hospital out-patients' department as and when required. This has been facilitated by the recent granting of an additional car allowance to the duly authorised officers.

A health visitor attends one of the hospital child psychiatric clinics.

Links with general practitioners. The local authority staff also work in close liaison with the general practitioners in the borough and enjoy amicable relations.

B. In addition to the existing arrangements, the authority expect to increase their staff employed in the mental health service and in particular intend to appoint a sufficient number of officers to act as mental welfare officers under the Mental Health Act, 1959, from such dates as the relevant provisions of the Act come into operation. Staff of all grades will continue to be encouraged to attend courses of training and arrangements will be made to release them.

The following additional arrangements are contemplated for strengthening :—

(a) Links with hospitals. It is anticipated that Case Conferences with hospital officers, already started, will become a regular feature and the employment of additional mental welfare officers will enable greater liaison with hospital authority staffs. A joint committee of the North Wirral Hospital Management Committee, the Wallasey Local Medical Committee, the Wallasey Executive Council and the Local Health Authority has been set up to discuss developments in the Mental Health Service as the provisions of the Mental Health Act, 1959, come into operation.

(b) Links with General Practitioners. The Wallasey Executive Council and Local Medical Committee are represented on the Joint Committee referred to above. In addition the general practitioners will be kept directly informed of developments through the medium of a monthly newsletter from the department of the Medical Officer of Health. General Practitioners will be invited to call conferences.

(c) Services through voluntary bodies and other local authorities. The provision of services through voluntary bodies or the agency of other local authorities will be implemented as necessary.

4. Junior Training Centre(s)

A. One centre having 70 places is at present available for the under 16 age group. The centre is administered directly by the local authority. No arrangements have been made with voluntary bodies.

Ancillary services are provided as follows :—

(a) Transport. Children are conveyed to and from the Centre by special bus.

(b) Meals. A mid-day meal is provided. $\frac{1}{3}$ pint of milk is provided daily for each child.

(c) Medical Inspection. Regular monthly visits of inspection are made by the Deputy Medical Officer of Health of the authority.

(d) Dental treatment. The Principal School Dental Officer makes visits to the centre and arranges for the carrying out of necessary treatment.

(e) Minor ailments are dealt with at the School Clinic.

By arrangements with the County Borough of Birkenhead children from that area attend the centre.

In addition to the existing arrangements, the Junior Training Centre, is expected to develop on the following lines :—

Further staff will be employed and equipment supplied as necessary at the existing centre. The local authority plans are expected to provide within the next year, after alterations to the centre are complete, places for all suitable cases, but further places will be provided as necessary.

Facilities will continue to be available for children from the County Borough of Birkenhead to attend.

5. Adult Training Centres

A. No centre is at present available specifically for the 16 years and over, age group. Provision is, however, made for the attendance of such persons at the Junior Training Centre and a special class is conducted for these persons. No arrangements have been made with voluntary bodies.

B. The proposed Adult Training Centre referred to in paragraph 2B above, which in the first instance is intended to accommodate the appropriate persons both from this authority and Birkenhead County Borough, is expected to develop on the following lines :—

The authority will endeavour to provide training and suitable occupation for the individual in an environment in which his/her resources are used to the best advantage. Initially vocational classes will be held and suitable training will be given. It is intended, should the needs so justify that later a "workshop" section be provided. The authority's plans are expected to provide, within the next three years, places for all suitable cases, but further places will be provided if necessary.

The authority will consult with the appropriate voluntary organisations regarding the facilities and amenities to be provided.

6. Residential Accommodation

A. No residential accommodation is at present provided specifically for the mentally disordered, although a small number of persons in this category are accommodated from time to time in existing hostels provided in accordance with Section 21 of the National Assistance Act, 1948.

B. It is intended to provide a 36-place residential hostel in the year 1960-61 for the under-mentioned categories of the mentally disordered, who, in the opinion of the Medical Officer of Health, require such accommodation, and short term care.

- (a) primarily persons suffering from mental illness who no longer require medical or nursing attention in hospital, and have no suitable home.*
- (b) persons having 'sub-normality' or 'severe sub-normality' of mind (as defined in Section 4 of the Mental Health Act, 1959) and have no suitable home.*

The authority will keep the demand for residential accommodation for the aforesaid categories of the mentally disordered under constant review and will, if necessary, provide additional accommodation.

Accommodation for persons suffering from "psychopathic disorder" of mind (as defined in Section 4 of the Mental Health Act, 1959) will be provided initially through the agency of voluntary bodies or other local authorities but provision will be made directly if necessary.

It will be the intention of the authority to take every practicable step to find suitable sheltered or ordinary employment for residents, and arrangements will be made should it be considered desirable, for their attendance at an Adult Training Centre.

7. Home Training

A. *No home teachers or "group" teachers are employed under the existing arrangements.*

B. Consideration will be given by this authority, if necessary, to the appointment of a home teacher.

8. Day Centres, Social Clubs and other Activities

A. *By the authority :—*

No day centres, social centres, or other activities are conducted.

By voluntary bodies :—

An evening social club for the "severely sub-normal" over 16 years of age only is held once weekly by the Wallasey Society for Mentally Handicapped Children. Accommodation is provided at the Junior Training Centre at a nominal rental.

B. It is the intention of the authority as the relevant provisions of the Mental Health Act, 1959, come into operation and as additional mental welfare officers are employed, to set up a Social Centre for the Mentally Disordered.

9. Home Visiting Service

A. *The following are the general arrangements for home visiting to provide care and after-care :—*

These duties are carried out by the duly authorised officers and mental health worker.

The services already administered by the authority for care and after-care under Section 28 of the National Health Service Act, 1946, in addition to the domiciliary services administered under other sections of the Act, are available to the mentally disordered.

B. The home visiting service will be suitably augmented when the additional staff referred to in paragraph 3B of these proposals are employed. The authority will make available such domiciliary care as is necessary, having regard to the needs of each particular case.

The authority will make arrangements as may be necessary to allow mental welfare staff to take suitable training and will encourage them to do so.

10. Guardianship

B. It is the authority's intention to exercise their functions under the Mental Health Act, 1959, in respect of persons placed under guardianship, whether under that of the authority or of other persons, when these replace the functions under existing legislation.

11. Future Developments

The authority will keep their mental health services under constant review and will augment them from time to time in any way necessary.

LIAISON ARRANGEMENTS WITH HOSPITALS, GENERAL PRACTITIONERS, ETC.

In accordance with Ministry of Health Circular 1/61 the following is a report on the liaison arrangements with hospitals and general practitioners designed to avoid unnecessary hospital admissions and out-patient attendance, and to facilitate early discharge.

General

The Medical Officer of Health is a member of the Local Medical Committee, a member of the Medical Advisory Committee of the North Wirral Hospital Management Committee and he is also invited to attend meetings of the Hospital Management Committee.

Admissions to Hospital

A small selection committee makes a careful choice of cases for admission to Highfield Maternity Hospital. The Medical Officer of Health and a general practitioner serve on this committee which meets once a month to consider applications for admission on social grounds. In those conditions where the home conditions are favourable, it is recommended that the mother should not be admitted to hospital for her confinement and that this should take place at home. There is an adequate staff of domiciliary midwives.

Early Discharges from Hospital

Good liaison exists between the local authority and hospital staffs. All early cases of discharge from maternity hospitals are notified both by telephone and writing, to the Health Department. The services of a midwife or a health visitor are made available as required. In other hospitals, the Almoners notify the Superintendent of the Home Nursing Service giving details of patients who are to be discharged home and who will require nursing care, and thus many cases which would otherwise have to remain in hospital are nursed at home.

There has been a considerable strengthening of the Home Nursing Service since the Council took over the administration of the service in 1950. There has also been a considerable expansion of the Home Help Service in the past ten years. Consequently it is possible for many, particularly the elderly, to be cared for in their own homes who would otherwise have to be admitted to hospital.

The inception of the clean linen service has facilitated the nursing of the incontinent at home. It is significant to note that almost 1,000 sheets per month are now issued from the department.

Plans are well advanced for a hostel for the more infirm which it is hoped to open in the autumn of 1961 for 50 patients. The opening of this hostel will further assist in accommodating some of the elderly patients who no longer require medical or nursing care in hospital.

The mental welfare officers enjoy good relations with the general practitioners and assist in any way possible in supporting patients who receive treatment at home. There are no day hospitals available in the Borough. The mental welfare officers attend case conferences held every two months at the Deva Hospital, and advise on home conditions of those patients who are under review for discharge.

There are no hostels under the Mental Health Act, 1959 yet available in the borough.

Nursing of Sick Children at Home and the Aftercare of Children discharged from Hospital

Careful consideration was given by the Health Committee to the provisions of circular letter L.H.A.L. 2/59 in connection with the above. It was not considered necessary, having regard to the small numbers of children involved, to operate a specialised home nursing service for children. Several of the Home Nurses hold certificates as Registered Sick Children's Nurses, and it was considered that the existing facilities are adequate.

PART IV.

General Health Services, etc.

FOOD AND DRUGS

A total of 386 samples of foods were taken from retail, wholesale and manufacturing premises.

Milk samples taken from retail supplies were all genuine, with an average analysis of 3.57% of fat and 8.61% of non-fatty solids for ordinary milk, and 4.96% of fat and 9.18% of non fatty solids for Channel Island milk.

One supply of milk to a dairy was found to be well below the standard. Samples taken at the farms showed the deficiency to be due to abnormal pasture conditions.

Samples of sausage all had a reasonable meat content, but there is a tendency for some manufacturers to produce sausages in which though the total meat content is satisfactory, the amount of fat exceeds the amount of lean meat.

Some meat products showed a lower meat content than might be reasonably expected, but in the absence of any firm standard, or a clearly false description, no positive action can be taken.

Proceedings were instituted in respect of "Foiled Milk Chocolate Novelties" which contained neither cocoa fat nor milk fat. A penalty of £5 was imposed. There is an increasing tendency for some manufacturers to use hardened vegetable oils in place of cocoa fat and milk solids containing little or no milk fat to produce an article which though not described as chocolate has the appearance of chocolate.

Ice lollies have up to 1% of citric acid. Of six samples of iced lollies sent for analysis, four had a p.H value as low as 3.4. During the consumption of an ice lolly the teeth and gums are in contact with this acid mixture for perhaps fifteen minutes, and though most children today receive a diet adequate in minerals and vitamins for healthy teeth and gums, the prevention of decay in the teeth must depend largely on their being cleaned and on the control of the consumption of sticky, sugary, acidic foods.

The Health Committee are concerned about the effect ice-lollies have on children's teeth and have referred the whole matter of the composition of ice lollies to the Association of Municipal Corporations.

Ice cream made with fat other than milk fat must be clearly labelled on any wrapper or container and must not bear any symbol or wording which would lead the purchaser to think it was made with milk fat.

FERTILISERS AND FEEDING STUFFS ACT

Samples of fertilisers and animal feeding stuffs are taken to ensure that they comply with statutory requirements and guaranteed analysis. 18 such samples were taken from small retail quantities or drawn from bulk quantities of many tons on manufacturers premises. All were satisfactory.

PHARMACY AND POISONS ACT

During the year the following applications were made:—

For registration	6
For re-registration	138

CONTROL AND SUPERVISION OF MILK SUPPLIES

This year, the last remaining areas to be included in the Tuberculosis Eradication Scheme were confirmed by the Minister of Agriculture, Fisheries and Food, thereby completing this plan of disease eradication which has been applied on an area basis and has involved the whole of England, Scotland and Wales.

The scheme was originally launched by the Minister in October, 1950, and some progress had at that time already been made. This had been achieved both voluntarily and by Statutory Enactment, the latter requiring compulsory notification by the owners of any animal suspected of being affected with tuberculosis. Much remained to be done, however, and 15 to 25 years was the period envisaged for this formidable task.

The fact that its completion has been achieved within 10 years is a tribute to all whose skills and labours have been directed to this end. Whilst the large scale commercial pasteurisation and sterilisation of milk continues to play an important role in ensuring the ultimate safety of supplies, neither method of heat treatment has been regarded as a means in itself of providing a complete answer to the problems which have for so long prevailed concerning the safety of milk supplies.

Each method has great merits and has proved a valuable expedient in rendering doubtful supplies safe, but the real problem and concern over the years has been one which has centred on the elimination of tuberculous infection from the milk at its source.

This criteria has now been reached and has been achieved by the Ministry of Agriculture who have vigorously pursued a disease eradication plan based primarily on the tuberculin testing of all bovine animals and the removal and slaughter of all reactors. When work has been completed in the last remaining areas, all milk produced in these Islands will be derived from cows which have been certified free from tuberculosis. Thus this crippling bovine disease which has for so long also constituted so great a menace to man, has been virtually wiped out, which is an achievement of great and outstanding significance in the fields of human and animal health.

Coupled with disease eradication has been constructional and hygienic improvements to shippens and farm buildings including dairies, which has done much in achieving the highest standards in the production of clean milk.

The pasteurisation and sterilisation of milk continues to ensure terminal safeguards to our supplies from which samples are regularly obtained by the Department for laboratory testing. The following is a summary of the sampling carried out during the year:—

Pasteurised Milk

No. of samples obtained 106,	
of which	103 satisfied both the Methylene Blue and Phosphatase Tests.
	1 failed Methylene Blue Test.
	2 test void.
	<hr/> 106 <hr/>

Tuberculin Tested Milk — Pasteurised

No. of samples obtained 36,	
of which	33 satisfied both the Methylene Blue and Phosphatase Tests.
	1 failed the Methylene Blue Test.
	2 test void.
	<hr/> 36 <hr/>

Tuberculin Tested Milk — Pasteurised (cartoned supplies)

No. of samples obtained from milk vending machines 10,	
of which	8 satisfied both the Methylene Blue and Phosphatase Tests.
	2 test void.
	<hr/> 10 <hr/>

The Methylene Blue test is a statutory test which is applied to milk to determine its keeping quality. The test is declared void if the overnight atmospheric temperature in the vicinity of the sample exceeds 65° F.

The Phosphatase test is a statutory test which is applied to pasteurised milk to determine the efficiency of the processing methods.

Sterilised Milk

7 samples of sterilised milk were submitted to the Turbidity Test which is a statutory test indicating the wholesomeness, or otherwise, of sterilised supplies. The laboratory reports received indicated that the samples were satisfactory.

The popularity of this grade of milk is being generally maintained; some favour its use, others dislike its alteration in taste to that of raw or pasteurised supplies; many, including children, prefer it, especially with the breakfast cereal, whilst for puddings and other milk dishes it is ideally suited owing to its rich and creamy consistency resulting from homogenisation. One of the advantages of sterilised milk is its potential keeping qualities. Unopened, it will remain sweet and wholesome in the warmest weather without resort to storage under refrigeration.

Tuberculin Tested Milk — Pasteurised

Tuberculin Tested Milk — Pasteurised in pint bottles and $\frac{1}{2}$ pint wax cartons is available throughout the Borough. $\frac{1}{2}$ pint cartons are obtainable from Milk Vending Machines which are sited in the Liscard, Wallasey, New Brighton and Moreton areas. Samples of milk taken from these machines have generally proved satisfactory to laboratory testing. The fact that 'test void' reports were received in 2 instances casts no reflection on the keeping properties or quality of this milk. No consumer complaints were received during the year, indicating satisfactory arrangements with regard to milk turnover and replenishments by those responsible.

Raw Milk

Farm bottled Channel Island milk produced from Jersey and Guernsey herds on farms in the Wirral Peninsula and in Cheshire comprise the only supplies of raw or unprocessed milk available within the Borough. "Channel Island," "Jersey," "Guernsey" and "South Devon" are the authorised designations which may be applied to such milk, which must have not less than 4% by weight of milk fat. Supplies are available through most distributors.

The samples of milk taken by the Department were obtained from the following sources:—

Dairies	73
Schools	49
Shop Premises	8
Delivery Vehicles	9
Milk Vending Machines	10

Total number of samples submitted for Laboratory testing	149
--	-----

Seven complaints which alleged the use of unclean milk bottles were received. One complaint was received alleging the sharing of drinking straws by school children, and a complaint was received involving the alleged contamination of milk bottles left uncollected in a school playground. The complaints were investigated, and, where justified, appropriate action was taken.

The Milk (Special Designation) Regulations, 1960

The Milk and Dairies (General) Regulations, 1960

The pasteurisation of milk under licence is carried out at 3 dairies in the Borough. The plants comprise a modern high temperature short time appliance and 2 "Holder" type plants. The sampling of milk from each source of supply for testing has indicated that the apparatus and processing methods are being efficiently maintained.

The mechanical application of steam, hot water, detergents and sterilants is the method used in maintaining the cleanliness and sterility of all milk apparatus and equipment, including churns and bottles.

There are 126 registered milk distributors licensed to retail bottled supplies of designated milk. The number of licences granted during this year was as follows:—

To use the special designation “ Pasteurised ”	118
To use the special designation “ Sterilised ”	96
To use the special designation “ Tuberculin Tested ” ...	74
Pasteuriser's Licences	3

178 visits were made to dairies and other premises engaged in the handling and storage of milk.

Milk Vessels

The mis-use of milk bottles continues to give rise to concern, although the present official views of the dairy industry as a whole on this particular matter are not known.

It may be claimed that nationally some noticeable improvement has been achieved, although from local observations there would appear to be no grounds for believing that any greater respect is being shown towards the milk bottle, or that the level of abuse to which it is from time to time subjected is in any way diminishing. “ Rinse and return promptly after use ” is a simple maxim which, if faithfully observed by everyone concerned, would mean not only an end to the milk bottle dilemma but also to a lessening of the numerous accidents resulting from broken glass and bottles, particularly on sands and beaches where unsuspecting children and grown ups alike all too frequently during the holiday season fall victims to the sinister hidden danger of broken glass.

A complaint was received and dealt with concerning the dumping of used milk bottles on enclosed land.

Milk in Schools Scheme

During the year 2,620,946 one-third pint bottles of milk (109,206 gallons) were supplied under the Milk in Schools Scheme, a decrease of 2,106 one-third pint bottles of milk (87 gallons) compared with the quantity supplied during the previous year.

Six suppliers are responsible for deliveries to the schools under contract. This provides for the supply of pasteurised milk in one-third pint bottles together with drinking straws.

Samples are frequently obtained from the schools for laboratory testing, thereby providing a check on the safety of the supplies and, at the same time, indicating the efficiency, or otherwise, of the processing methods.

Supplies generally were satisfactorily maintained. Isolated instances were reported involving the alleged presence of foil caps, or other extraneous matter, in milk supplied under the terms of the Scheme. Each case was investigated and in one instance a communication was forwarded to the Company making deliveries.

Fresh Orange Juice

The demand for this beneficial fresh fruit drink continues. It is available not only from the milk roundsmen, but from many other distributing and selling points. Supplies are available from

automatic vending machines and, in its ice cold or frozen state, it has a particular appeal to children. Where orange juice is supplied in one pint or one-third pint bottles, the returned used bottles are subjected to the same cleansing processes at the dairies as are applied to milk bottles.

New automatic vending machines sited in one part of the town, and dispensing hot beverages during the winter in the form of hot soups and chocolate, suffered much damage from time to time at the hands of vandals.

Public Health Laboratory Service

Owing to reorganisation within the service, the laboratory facilities available to this Authority at Birkenhead were, during the year, terminated. Under a new arrangement, facilities are now provided at the City Laboratories, Liverpool, where all samples and specimens are now forwarded by this Authority.

Charter Celebration Exhibition

A small exhibit was included in the historic Exhibition held in the Town Hall. This portrayed the changes and developments which have taken place in the type of vessels and receptacles used in the retail sale and delivery of milk during the latter half of the century.

June Dairy Festival

During the holiday season the National Milk Publicity Council, by arrangement with the Corporation, utilised a site on the New Brighton promenade for staging a Milk Publicity Exhibition. This took the form of a mobilette, which is an elaborately constructed and equipped mobile milking parlour complete with cow and all equipment and apparatus necessary to demonstrate modern methods of machine milking and cooling.

The National Milk Publicity Council devotes much care and expenditure to this very enterprising form of milk publicity, at the same time observing the highest standards of hygiene. To encourage the milk drinking habit, ice cold cartoned supplies of milk were on sale to the public.

MEAT AND FOOD INSPECTION

Visits made to food shops, including butchers, fishmongers and other shops engaged in the sale and handling of foodstuffs, resulted in the following quantities of food being disposed of as unfit for human consumption:—

Meat		Fish	
	lbs.		stone
Beef	160	Fish Fillets	1
Bacon	137	Herrings	1

Canned Goods

	Cans		Cans
Fruit	118	Fruit Juices	19
Milk	24	Fish	18
Meat	23	Soup	12

Poultry

1 chicken carcase — uncooked — 6½ lbs.
22 tins chicken.

Miscellaneous

Items of Foodstuff	22	Quantity of Miscellaneous	
Sliced Meat — various ...	65 lbs.	Frozen Foods	203 pkts.
		Margarine & Cooking Fat	198 lbs.

In addition, during the year 159 containers comprising corned beef, corned mutton, chopped pork, cooked gammon, cooked shoulder, pork luncheon meat, lunch tongue, jellied veal and pork representing a total weight of 1,140 lbs. were dealt with by voluntary surrender at food premises as being unfit for the purpose of sale for human consumption. 36 lbs. of canned salmon was similarly dealt with at a Food Factory.

44 consumer complaints were received relating to purchased foodstuffs. 128 requests were received to visit food premises in connection with foodstuffs found to be in a doubtful or unfit condition. At a butcher's shop, a hind quarter of home-killed beef affected with bone taint was surrendered for destruction. At the premises of another butcher, it was necessary to condemn a 20 lb. leg of pork which, owing to injury, was found to be unfit for the purpose of sale. A fire, which caused considerable damage at a factory manufacturing Easter eggs and chocolate confectionery resulted in 4,872 lbs. of slab chocolate being condemned. This was necessary owing to contamination by smoke and because of the risk of the presence of glass particles in the chocolate caused by the breakage and fragmentation of windows during the fire.

Special enquiries and investigations were made in a number of instances involving foodstuffs, and communications were forwarded to manufacturers. In a number of cases, special consideration was given to the legal provisions governing the sale of food, but no proceedings were instituted.

Six visits were made to hospital catering departments and forty-nine visits to the premises of wholesale food distributors.

Formerly foodstuffs unfit for human consumption, but which were otherwise suitable for processing for animal feeding purposes, were sent to the Corporation plant at Birkenhead. These processing facilities are no longer available and all unfit food is disposed of by burial. Fats and similar foods unfit for human consumption are diverted for industrial refining.

Various matters arising in the course of visitation were referred to the District Public Health Inspectors.

During the year, services relating to meat and food inspection were provided to the following catering departments of the Corporation:—

Welfare Department
School Meals
Town Hall
Ferries
Motor Bus Undertaking.

The Animal Feeding Meat and the Meat Staining Regulations, 1959

These Regulations, which apply in England and Wales, came into force during the year and require all butcher's meat and imported meat unfit for human consumption to be sterilised and all knacker meat to be stained or sterilised before entering the chain of distribution. Raw feeding meats required for zoos and menageries, etc., and raw meat required for medical and veterinary instructional schools, and for pharmaceutical purposes, are not affected by the Regulations.

All pet shops in the Borough were advised of the general provisions of these Regulations.

WALLASEY AND ALFRED LAIRAGES

Landing Place for Irish and Isle of Man Animals and Foreign Animals Landing Wharf

This year 51,144 store and fat cattle were accommodated and subsequently despatched by rail and road transport from the Lairage at this landing place. This figure shows an increase of 10,730 on the number of cattle handled in the previous year.

Of the animals detained by the Veterinary Officers, 109 were slaughtered, this being 50 more than the number slaughtered the previous year.

Post mortem examination of all carcasses, viscera and offal was carried out by this department, and the following is a tabulation of the diseased conditions met with and the condemnations made:—

	Cattle
Number killed	109
Number inspected	109

All diseases except Tuberculosis and Cysticerci

Whole carcasses condemned	Nil
Carcasses of which some part or organ was condemned	74
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci	67.9%

Tuberculosis only

Whole carcasses condemned	Nil
Carcasses of which some part or organ was condemned	1
Percentage of the number inspected affected with tuberculosis	0.91%

Cysticercosis

Carcasses of which some part or organ was condemned	Nil
Carcasses submitted to treatment by refrigeration	Nil
Generalised and totally condemned	Nil

Total weight of meat and offal condemned

Meat	Nil
Offal	1,370 lbs.

94 visits were made during the year to the Slaughter House at this landing wharf.

Slaughterhouse Act, 1958

Under this Act, the Council were required to review the existing and future requirements of the district in connection with the need for slaughtering facilities and, in turn, to furnish the Minister with a report thereon. This review was carried out and completed during the year and the requisite report furnished to the Minister.

PUBLIC HEALTH (SHELLFISH) REGULATIONS**Mussel and Cockle Beds — Wallasey Foreshore**

During the year a reference was received from the Liverpool Port Sanitary Authority concerning the taking of cockles from the Leasowe Foreshore for the purpose of sale at a local cafe. Enquiries revealed that no serious attempt had been made by the Cafe Proprietor in this connection, and a warning was issued.

Two persons made enquiries concerning the taking and cooking of shellfish for the purpose of sale. In one case the enquiry was not pursued; in the other, representatives of the Port Health Authority and of this department had consultation at the premises which it was proposed to use for this purpose, but the applicant, after being advised of the necessary work required to comply with the Regulations, abandoned the project.

No further complaints were received during the year relating to the taking of shellfish from these layings.

DISEASES OF ANIMALS ACTS AND ORDERS**Notifiable Scheduled Diseases of Animals**

In November, a large area of the country was placed under movement restriction to prevent the spread of foot and mouth disease. The Borough was included but, under a new arrangement, licences authorising the movement of animals have now to be issued by the Licensing Authority at the place of destination. During the period of restriction a number of fat pigs were moved under licence to slaughterhouses and bacon factories outside the Borough.

During the year movement restrictions were also imposed for preventing the spread of swine fever. This also embraced a substantial area of the country and included the Borough. During the period of restriction fat pigs were licensed out of the Borough and store pigs were brought into the Borough under licence for fattening purposes.

A pigkeeper reported the death of a pig which had recently been brought on to the piggery from a saleyard. This case was dealt with by a private veterinary surgeon. Post mortem examination of the carcase revealed no evidence to indicate the presence of any notifiable disease and no further deaths of swine took place at the piggery.

Under the Regulation of Movement of Swine Order, 1959, 375 store pigs were brought into the Borough from Chester, Mold, Beeston and Abergele markets, a decrease of 186 on the previous year.

A suspected case of anthrax involving the carcase of a short-horn cow was notified to the Ministry of Agriculture. Veterinary examination and diagnostic laboratory tests resulted in a negative report.

A complaint was received relating to children gaining access into a field and handling and riding a horse which was alleged to be affected with ringworm. The matter was investigated with negative results.

During the year references were received from the coastguard and police concerning carcases washed ashore during high tides. The carcases included those of an ox, sheep, porpoise, pig and dog. Removal and disposal of the carcases in each case was made by the Borough Engineer's Department.

Severe flooding of the River Birket following incessant rain which coincided with high tides in the Mersey resulted in 12 Fresian heifers being in danger of becoming trapped by the rising waters. Darkness added to the hazards of the situation, but the animals were subsequently driven through the flood water to ground at a higher level.

Seasonal spraying with an approved all-purpose single type dip was again resorted to by the owner of the sheep and lambs grazing the Bidston Marshes. A problem related to dipping which has, for some time, prevailed at this site has not yet been resolved. One of the main difficulties has been in obtaining an available supply of clean water. The water used in the spraying process is obtained from a mains supply and has to be conveyed to the site where the spraying is carried out.

The Waste Food Order, 1957, requires the adequate cooking or boiling of all swill as a means of safeguarding against the danger and risk of Foot and Mouth Disease and Swine Fever. Visits were made to piggeries in connection with the enforcement of these Regulations.

New Orders made by the Ministry of Agriculture, Fisheries and Food were publicised during the year, and publicity material was also distributed relating to potato crop damage and the colorado beetle. A number of instances were reported of suspected colorado beetle. In each case comparative examination of the beetles revealed no characteristics to confirm suspicion. One enquiry concerning potato blight was also received.

THE CHILDREN ACT, 1948

Children are medically examined as soon as possible after admission to the Children's Homes, and also before discharge, and the medical staff of the Public Health Department give advice whenever necessary.

THEATRICAL EMPLOYERS' REGISTRATION ACT, 1925

No applications for registration were received during the year.

DOMESTIC SERVANTS' REGISTRIES

There were no applications for registration as Domestic Servants' Registries during the year.

PART V.

*Report of the Chief Public Health Inspector
on the
Environmental Health and Hygiene
of the Area*

REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR ON THE ENVIRONMENTAL HEALTH AND HYGIENE OF THE AREA

Introduction

I have pleasure in presenting this report on the work of the public health inspectorate during the year 1960. This also happens to be my third and last report.

Slum Clearance

The Council programme for the demolition of unfit dwelling houses has now completed its fifth year. During the five years approximately 600 houses have been included in clearance and compulsory purchase orders, or have become subject to demolition orders, closing orders or voluntary undertakings by owners. This represents the completion of the first post-war five-year programme, but much remains to be done. Early in the year circular 2/60 was issued by the Ministry of Housing and Local Government requesting that "local-authorities with a continuing problem who foresee that they will have completed their current five-year programme by the end of 1960 should forthwith review the position and submit further proposals to the Minister."

In March, 1960, a special Report was submitted to the General Health Committee recommending the inclusion of 567 dwellings in a new programme covering the years 1961/65 inclusive. This proposal was made after a completely fresh survey of the town which absorbed a great deal of inspectorial time.

Clean Air

During the year the Council's smoke control programme also forged ahead; initial surveys were completed in respect of nearly 6,000 dwelling houses. On the 1st September the Wallasey (Moreton) Smoke Control Order No. 2 came into operation. This was the largest area so far, embracing about 1,100 premises. The Wallasey (Upton Road) Smoke Control Order No. 3 came into operation on 1st October. A large smoke control scheme at Brighton Street was also confirmed and an Order made in respect of the whole of Leasowe and part of Wallasey Village.

Food Hygiene

Much time was also devoted during the year to improvement of food and catering premises. As in previous years a special effort was made to bring as many premises as possible in the New Brighton area up to standard before the season opened, followed by constant surveillance.

New Legislation

Towards the close of the year, the Noise Abatement Act became law. This provides a new weapon against noise and vibration where it amounts to a nuisance. The Offices Act and the Caravan Sites and Control of Development Act received the Royal Assent just before Parliament rose for the Summer Recess.

Although the Offices Act is now on the Statute Book the Home Secretary has made a very important announcement. He

has said that the Government have decided to introduce comprehensive legislation to cover shops, offices and those railway premises not already covered by factory legislation. Other classes of premises dealt with in the Gowers Committee Report may also be included. It is intended to introduce the new Bill before the Offices Act comes into operation in 1962.

New Training Scheme

The year also witnessed an important event for Public Health Inspectors in the introduction of a new training and examination scheme. The new basic educational standard will be passes in the General Certificate of Education at "O" level standard in at least four subjects. A pass in each of three specified groups of subjects will be required with one additional optional subject. As under the existing scheme, there is a number of alternative qualifications to the General Certificate of Education, but they are much fewer than in the past.

Since the war, paid pupillage has become the established method of entry to the profession. This has superseded the older system of unpaid pupillage coupled in many instances with a premium for the Chief Inspector. Practical training will in future not only be on a full time basis but will extend throughout the period of theoretical instruction i.e. four years. Local Authorities employing students will have to be able to provide comprehensive practical training and if not able to provide facilities over the whole field should be able to arrange with other authorities for the completion of the student's practical training. The Board prescribes the maximum number of students any local authority may employ at any time.

Theoretical instruction will be the basis of part-time day release over a period of four years, the course being a specialised one for inspectors alone. The new scheme introduces considerable changes in the form and conduct of examinations. At the end of each of the first three years of training students will have to pass an examination. The final examination on the completion of training will be for the Board's Diploma and will include four papers, two practical tests and an oral examination.

This new scheme, based on a much widened syllabus, brings the training and examination system into line with the nature and extent of duties and responsibility. The foundations were laid by the Sanitary Inspectors' Working Party which reported in 1953. It can truly be said that the introduction of this new system is an event of considerable importance both to local authorities and to those entering this branch of the public health service.

Staff

Several staff changes occurred during the year. Mr. L. Jones, District Public Health Inspector, left to take up a similar position at Wigan; Mr. I. Thompson, District Public Health Inspector, became Deputy Chief Public Health Inspector at Darlaston. Both left with our best wishes for future success.

Mr. K. J. Warbrick and Mr. L. G. Ringrow joined the staff as District Public Health Inspectors in November having previously served with Liverpool Corporation.

Earlier in the year Mr. A. P. Thompson, Mr. J. H. Holland and Mr. S. G. Haynes were appointed as technical assistants to help with the implementation of the Council's smoke control plans.

Examinations

During the year, Mr. W. Farr, District Inspector, was successful in the examination for the Royal Society of Health's Diploma for Smoke Inspectors. Mr. L. G. Ringrow and Mr. K. J. Warbrick both gained the Diploma in the Inspection of Meat and Other Foods.

Conclusion

May I conclude with an expression of appreciation for the support received from both Chairman and Members of the General Health Committee and from Dr. Hall, Medical Officer of Health. I am also very conscious of the goodwill and assistance which has invariably been forthcoming from my colleagues in other Departments. In addition my thanks are due to my Deputy, Mr. Ridgway, the Public Health Inspectors, Technical Assistants, secretarial and other staff for their loyalty, enthusiasm and hard work during the year.

Abatement of Nuisances and House Repairs

The year's work, in respect of the enforcement of house repairs, has followed the pattern of previous years. As a result of conflicting judgments given by the County Courts in respect of appeals against notices served by various local authorities under section 9 of the Housing Act, 1957, reliance has been placed mainly on the nuisances provisions of the Public Health Act, 1936.

Complaints received during the year numbered 2,113, which is 146 less than for the previous year. The complaints and action arising out of them led to 16,554 visits being made to dwelling houses; 838 preliminary and 523 statutory notices were served. The summary of the defects remedied indicates the effectiveness of the enforcement procedure. Legal proceedings were resorted to on 16 occasions.

Dwelling Houses

	<i>Nuisances Abated</i>
Roofs repaired	391
Gutters and Spouts repaired or renewed	201
External walls and chimneys repaired	224
Damp Proof courses provided	160
Yards paved or repaired	75
Internal walls and ceilings repaired	226
Doors, Windows, repaired or renewed	257
Floors repaired or renewed	83
Rooms, passages, etc., cleansed or redecorated	1
Staircases, handrails, repaired	17
Fireplaces, stoves, flues, repaired or renewed	59
Sinks, baths, washbasins, repaired or renewed	30
Food stores provided or improved	1
Water supply improved or reinstated	65
W.C's cleansed or redecorated	2

W.C's repaired or provided	228
Soil/waste pipes, repaired or renewed	88
Drains cleansed from obstruction	99
Drains repaired or improved	17
Drainer boards repaired or renewed	9
Miscellaneous improvements effected	24
Total ...	<u>2,257</u>

General Environmental Public Health Nuisances Abated

	<i>Notices Abated</i>
Removal of Offensive Accumulations	20
Cleansing of Ditches and Streams	—
Cinemas, Dance Halls: Contraventions	1
Schools: W.C's — Repairs and Renewal	—
Schools: Other Nuisances	—
Total ...	<u>21</u>

Total Number of Notices Served (all Acts)

	<i>Served</i>	<i>Abated</i>	<i>Out- standing</i>
Preliminary	1,693	1,921	509
Statutory	525	556	135
	<u>2,128</u>	<u>2,477</u>	<u>644</u>

Legal Proceedings (Cases heard)	16
No. of Nuisance Orders applied for	8
No. of Nuisance Orders obtained	7
Total amount of fines and costs	£32 13 0
No. of prosecutions for non-compliance with Nuisance Order	6
Total amount of fines	£22 0 0

NO. OF FOOD BUSINESSES EXISTING WITHIN THE BOROUGH AT 31st December 1960

Classification according to the areas administered by the District Public Health Inspectors

Type	Seacombe	Egremont	Poulton	Liscard	New Brighton	Wallasey Village	Moreton	Total
School Kitchens and Canteens	4	7	3	10	7	6	9	46
Local Authority Hostels, Nurseries, etc. ...	1	2	—	1	3	—	2	9
Other Local Authority Premises ...	—	—	—	1	2	1	1	5
Grocers ...	32	44	23	25	23	32	23	202
Cafes ...	6	10	2	4	73	5	3	103
Greengrocers ...	16	27	14	21	10	21	15	124
Confectioners and Bakehouses	6	12	10	16	7	10	13	74
Sweets ...	28	40	15	33	36	25	22	199
Butchers ...	15	13	12	18	9	14	15	96
Fried Fish ...	10	8	3	9	9	3	7	49
Shellfish and Refreshment Stalls ...	—	—	—	—	27	—	5	32
General ...	18	10	9	21	19	8	24	109
Food Preparing Premises ...	1	1	1	2	3	2	2	12
Wet Fish ...	6	6	4	4	2	4	3	29
Chemists and Druggists ...	6	8	5	5	4	6	8	42
Club Premises and Canteens	10	8	5	6	6	12	4	51
Licensed Premises ...	20	9	8	16	26	8	9	96
Miscellaneous ...	—	1	—	—	3	—	—	4
TOTALS ...	179	206	114	192	269	157	165	1282

FOOD AND DRUGS ACT, 1955 : FOOD HYGIENE

Despite heavy demands made upon the time of the District Public Health Inspectors, it has been possible to maintain constant vigilance in this important field. It is through an educational process, constantly maintained, that good practices will eventually prevail throughout all food-handling activities.

Food Premises

No. of Visits to All Premises ... 2,227

Viz:—

(a) Cafes, etc. (Visits) ...	197
(b) School Meals (Visits) ...	90
(c) Other F.P.P. (Visits) ...	220
(d) Licensed Premises (Visits) ...	113
(e) Ice Cream: (Visits re Registration) ...	17
„ Manufacturing Premises (Visits) ...	9
„ Sales and Storage Premises (Visits) ...	463
(f) Food Shops ...	1,657
(g) Sec. 16B Premises ...	102

Work Carried out under Food Hygiene Regulations

Food Premises

Premises cleansed or repaired	198
Equipment cleansed or repaired	89
Hot, cold water supply provided or improved	135
Sinks, washbasins provided or improved	154
Food storage facilities provided or improved	101
Personal hygiene improved	82
Sanitary accommodation cleansed, repaired or improved	91
Miscellaneous improvements effected	265
Total ...	1,115

Registered Food Premises

The Minister of Health has requested that a classification of registered premises be included in this report. The required information is as follows:—

	<i>No. of Premises</i>	<i>No. of Visits</i>
List of Registered Food Premises, 1960		
Section 16 (a) Food and Drugs Act, 1955	560	472
Section 16 (b) Food and Drugs Act, 1955	144	102
Total ...	704	574

(N.B.—A classification of the types of premises registered under section 16 (a) is given in the part of the report dealing with ice cream).

Summary of Types of Food Premises Registered under section 16 (b) Food and Drugs Act, 1955

Bakehouses, Meat Pies	45
Meat Pies and Cooked Meats	19
Butchers, Sausages	45
Sausages and Cooked Meats	23
Grocers, Potted Meats	2
Boiled Hams	5
Cooked Meat Factories	2
Other Premises, Meat Pies	3

CONTROL OF ICE CREAM PREMISES

74 samples of ice cream were subjected to the methylene blue test; 6 of them were placed in Grade 3 and 3 in Grade 4 — the "unsatisfactory" grades. 18 samples were taken from 2 Wallasey manufacturers, 1 of which failed to reach the standard suggested by the Minister. About 6 samples were taken of each of the brands of ice cream manufactured outside the borough and 8 failed to comply with the desired standard. A summary of the gradings is given in succeeding pages. 489 inspections of ice cream premises were made; 17 of the visits being in respect of new registrations to sell ice cream.

ICE CREAM STATISTICS RELATIVE TO THE YEAR 1960

Registrations Approved during 1960

Storage only	1
Sale and Storage	16
Manufacture and Sale	—
Total ...	17

Registrations Refused Nil

Registrations Cancelled Nil

Number of Premises on Register at close of Year

Storage and manufacture	4
Sale only	175
Storage only	4
Storage and sale	372
Manufacture, storage and sale	2
Manufacture and sale	3
Total ...	560

Visits of Inspection

Visits <i>re</i> applications for registration	17
Routine visits	472
Total ...	489

ICE CREAM SAMPLING, 1960

Classification of Samples by Location of Manufacturer

Ice Cream Manufactured in Wallasey

Grade	Methylene Blue (hours)					
	4½- hrs. or over	3½-4 hrs.	2½-3 hrs.	1½-2 hrs.	½-1 hr.	0- hrs.
1	13	—	—	—	—	—
2	—	4	—	—	—	—
3	—	—	—	1	—	—
4	—	—	—	—	—	—
Total	13	4	—	1	—	—

Ice Cream Manufactured outside Wallasey

1	46	—	—	—	—	—
2	—	1	1	—	—	—
3	—	—	—	5	—	—
4	—	—	—	—	—	3
Total	46	1	1	5	—	3

Result classified according to identity of Manufacturer

Ice Cream sampled at point of sale within the
County Borough District of Wallasey during 1960

Factories outside Wallasey—Table I.

Manu- facturer Code No.	No. of Samples examined	No. of Samples in Provisional Grades				Grading of Manu- facturer by Ministry of Health recom- mended Standards	
		Grade 1	Grade 2	Grade 3	Grade 4	Satis- factory	Unsatis- factory
1	6	6	—	—	—	*	—
2	6	6	—	—	—	*	—
3	6	—	1	2	3	—	*
4	6	6	—	—	—	*	—
5	7	6	—	1	—	*	—
6	6	6	—	—	—	*	—
7	6	6	—	—	—	*	—
8	6	5	—	1	—	*	—
9	6	5	1	—	—	*	—
10	1	—	—	1	—	Not classified	
	56	46 (82.14)	2 (3.57)	5 (8.93)	3 (5.36)	8 1 not class	1 ified

Factories located in Wallasey—Table II.

Manu- facturer Code No.	No. of Samples examined	No. of Samples in Provisional Grades				Grading of Manu- facturer by Ministry of Health recom- mended Standards	
		Grade 1	Grade 2	Grade 3	Grade 4	Satis- factory	Unsatis- factory
1	9	7	2	—	—	*	—
2	9	6	2	1	—	*	—
	18	13 (72.2)	4 (22.2)	1 (5.6)	—	2 (100.0)	—

NOTES.—1. Figures in parenthesis denote percentages.

2. The manufacturer numbered 10 Table I above is not classified owing to insufficient number of samples taken.

Three samples of lolly ices were taken during the year; the results were as follows: —

<i>Sample No.</i>	<i>Colony count per ml. @ 37°C</i>	<i>Coliform organisms</i>	<i>B. Coli</i>
1.	12	Present in 1 ml.	Absent in 1 ml.
2.	340	Present in 1/10th ml.	Absent in 1 ml.
3.	1,050	Present in 1/10th ml.	Present in 1/10th ml.

No organisms of the Salmonella group and no Staph. pyogenes were found in any of these 3 samples.

ADMINISTRATION OF THE SHOPS ACT, 1950

There is one full-time shops inspector employed in this section of the department and all the provisions of the Shops Act are administered. To avoid duplication of visits the district public health inspectors enforce the Act in food shops, which they visit for other purposes. The shops inspector deals with other shops. Routine patrolling to check compliance with hours of closing and Sunday trading has been discontinued, visits only being made on receipt of complaints.

The health and welfare sections of the Shops Act were the main reason for the 3,666 routine visits made during the year. The general standard of compliance with these aspects of the Act continues to be good.

Nature of Contraventions remedied

Section 37 (1) Provision of seats for female employees	—
„ 38 (1) (a) Suitable and sufficient ventilation	3
„ (b) Maintenance of reasonable temperature	1
„ 38 (2) Provision of Sanitary Accommodation	4
„ 38 (3) Sanitary Accommodation cleansed and repaired	36
„ 38 (4) Provision of suitable and sufficient lighting	1
„ 38 (4) Provision of washing facilities	4
„ 38 (5) Provision of facilities for meals	—
Notices and Documents provided	630
General sanitary conditions improved	10

Hours of Employment

Contraventions detected and remedied	—
---	---

Hours of Closing and Sunday trading

Number of contraventions noted	2
„ warnings issued	—
„ prosecutions instituted	2

HOUSING

Rent Act, 1957

PART I: Applications for Certificates of Disrepair

(1) Number of applications for certificates	41
(2) Number of decisions not to issue certificates	1
(3) Number of decisions to issue certificates	
(a) in respect of some but not all defects	38
(b) in respect of all defects	5

(4) Number of undertakings given by landlords under paragraph 5 of the First Schedule	37
(5) Number of undertakings refused by Local Authority under proviso to paragraph 5 of the First Schedule	—
(6) Number of Certificates issued	8

PART II: Applications for Cancellation of Certificates

(7) Applications by landlords to Local Authority for cancellation of certificates	8
(8) Objections by tenants to cancellation of certificates	—
(9) Decisions by Local Authority to cancel in spite of tenants' objection	—
(10) Certificates cancelled by Local Authority	10

Summary of repairs executed on the 10 certificates of disrepair which were cancelled during the year

Roofs repaired	5
Gutters and Spouts repaired or renewed	1
External Walls and Chimneys repaired	20
Damp Proof courses provided	—
Yards paved and repaired	6
Internal Walls and Ceilings repaired	2
Windows and Doors repaired or renewed	48
Floors repaired or renewed	5
Staircases and Handrails repaired or renewed	—
Fireplaces and Flues repaired or renewed	3
Baths, Sinks or Lavatory Basins repaired or renewed	1
Water supply improved	—
W.C.'s cleaned	—
W.C. repairs and renewals	4
Food stores provided	—
Soil Pipes or Waste Pipes repaired or renewed	1
Drains repaired	—
Drainer Boards repaired or renewed	1
Miscellaneous repairs	3
External decorations	4
Total	104

Clearance and demolition of unfit houses

Work continued throughout the year on the clearance of the houses in the Council's five-year programme. The work is necessarily arduous and the procedure protracted, involving detailed inspection, the serving of notices and, where objections are lodged, the conducting of a public local inquiry by an inspector of the Ministry of Housing and Local Government. The following orders, etc., were made during the year:—

Demolition Orders

7 Haig Avenue.
 "Rose Cottage," Netherton Road.

Demolition by Voluntary Undertakings

- *23 Arrowe Avenue.
- 29 Arrowe Avenue.
- 1, The Cottage, Folly Lane.
- 2, The Cottage, Folly Lane.
- *5 Snowden Road.
- 226 Wallasey Village.
- 228 Wallasey Village.
- 230 Wallasey Village.
- 232 Wallasey Village.
- 156 Wallasey Village.
- 158 Wallasey Village.
- 160 Wallasey Village.
- "The Bungalow," Butler's Garage, Breck Road.
- 50 Bermuda Road.
- 52 Bermuda Road.
- 95 Bermuda Road.
- 42 Carnsdale Road.

Closure by Voluntary Undertaking

- 10 Belle Vue Road.

Certificates of Unfitness

- 4 Manor Road.
- 6 Manor Road.
- 2 Seymour Place West.
- 4 Seymour Place West.
- 6 Seymour Place West.
- 10 Seymour Place West.
- 12 Seymour Place West.

* Denotes premises demolished during the year.

Clearance Orders

- Clearance Order No. 100: Alfred Road.
4—36 Alfred Road.
- Clearance Order No. 101: Breck Place.
1—13 Breck Place.

There were no objectors and the above orders were confirmed without modification on 20th July, 1960.

- Clearance Order No. 103: Rock Cottages
Rake Lane
1—5 Rock Cottages.
-

The owner of the five houses objected on the grounds that the properties were not unfit. A public local inquiry was held on 14th June, 1960, to consider the objection. The Order was confirmed without modification on 14th September, 1960.

- Clearance Order No. 102: Urmson Road
13—19 Urmson Road.

A public local inquiry was held on 27th September, 1960, to consider objections. The order was confirmed without modification on 1st February, 1961.

The Wallasey (No. 105) 236a/238a Wallasey Village

Clearance Order, 1960.

236a/238a Wallasey Village.

A clearance order was made on the above properties on 6th October, 1960. No objections were submitted and the order was confirmed without modification on 27th February, 1961.

Compulsory Purchase Orders

The Wallasey (Clearance Nos. 97—99) Seymour Place

Compulsory Purchase Order, 1959.

8, 14, 16, Seymour Place West.

1—17 Seymour Place East.

2—18 Seymour Place East

1—4 Plantation Cottages.

1, 3, 22, 24 Seymour Street.

A public local inquiry was held on 14 June, 1960, to consider objections. The Order was confirmed without modification on 20th September, 1960.

The Wallasey (Clearance No. 104) Prospect Buildings, and Prospect Cottages Compulsory Purchase Order, 1960.

1—3 Prospect Buildings.

1—2 Prospect Cottages.

The above compulsory purchase order was made on 6th October, 1960. No objections were received and the order was confirmed without modification on the 7th March, 1961.

Progress Report of Action under Housing Acts, 1930-1957

Position as at 31st December, 1960

	No. of dwelling houses demolished		Number of persons displaced
	Unfit	Other	
Land coloured "pink"	1,026	—	2,741
Land coloured "grey"	—	10	42

Unfit Houses not included in Clearance Areas

	Number of houses	Number of persons displaced
(1) Housing Act, 1957:—		
(a) Houses demolished as a result of formal procedure under Sec. 17 (1)	304	999
(b) Houses demolished as a result of informal notices preliminary to formal procedure under Sec. 17 (1)	171	434
(c) Local Authority owned houses subject to certificates of unfitness	15	50
(d) Houses closed in pursuance of an undertaking given by the owners under Sec. (17)	11	33
(e) Parts of buildings closed (Sec. 18)	21	41
(f) Houses made fit:—		
(i) as a result of formal notices under Sections 9 to 12	256	—
(ii) as a result of informal notices preliminary to formal procedure under Sections 9 to 12... ..	851	—
(1) Housing Act, 1957:—		
(g) Closing Orders made under Section 17	3	14
(h) Demolition Orders determined and Closing Orders substituted under Section 26	—	—
(i) Demolition Orders quashed under Section 24	—	—

Overcrowding and Allocation of Tenancies

The Council continued to operate its Group-plus-Points Scheme for re-housing. Re-housing of families from unfit houses remains outside the points scheme. The following summary shows the shares of lettings now in force.

Overcrowded tenants, and sub-tenants)	
and not overcrowded sub-tenants)	85%
Health	12%
Emergency	3%

All overcrowding cases must have been overcrowded for at least one year to obtain the extra points allocated for overcrowding.

During the year, the housing circumstances of 506 families were investigated in connection with housing applications, 343 of these as a result of applications for inclusion in the Overcrowded group. 156 families were found to be overcrowded for the purposes of the points scheme, which employs a standard better than that of the Housing Act.

Applications for rehousing on health grounds showed a decrease of 44 on the previous year. 163 applications were considered and these are analysed below. It is only possible for the most urgent cases to be recommended for rehousing, and only 20 applicants in this class received the approval of the Medical Officer of Health. In 5 of these instances, the illness giving rise to the need for rehousing was pulmonary tuberculosis, one fewer than in the previous year. The bulk of the applications came from persons

suffering from old age, arthritis and high blood pressure. These cases all require ground floor accommodation.

Housing Applications, 1960

Analysis of 506 families investigated as a result of references from Housing Department.

	Overcrowded		Not Over-crowded Points Scheme	Applications on Medical Grounds			
				Tuberculosis		Other Cases	
	Housing Points Act, 1936 Scheme			Approved	Rejected	Approved	Rejected
Ten-ants	17	50	121	1	17	7	60
Sub-Ten'ts living in r'ms	44	106	66	4	12	8	54
Totals	61	156	187	5	29	15	114

Provision of New Houses

The Borough Architect has provided the following report on the provision of new housing accommodation :—

	During 1960	Post-War Period incl. 1960	In Progress 31/12/60
Houses erected by private enterprise	77	1,706	65
Units of accommodation erected by Local Authority under Housing Acts	107	3,705	155
Tenant Ownership Houses erected by Local Authority ...	12	174	2

INSPECTION OF FACTORIES

The number of factories on the register at the end of the year was 255, a decrease of 1 compared with the figure for 1959. 551 visits were made. An abstract of the results of these inspections in the form required by the Ministry of Labour and National Service is set out overleaf:—

Administration of the Factories Act, 1937
Inspections for Purposes of Provisions as to Health

Premises	No. on Register	Number of	
		Inspections	Written Notices*
Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced	7	18	—
Factories not included in above in which Section 7 is enforced by the Local Authority	223	518	3
Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers premises) ...	25	15	—
Totals	255	551	3

*In addition 30 verbal notices were given to occupiers regarding various matters.

Cases in which defects were found

Particulars	Found	Remedied	Referred	
			To H.M. Inspector	By H.M. Inspector
Want of cleanliness (S.1)	—	—	—	—
Overcrowding (S.2)	—	—	—	—
Unreasonable temperature (S.3) ...	—	—	—	—
Inadequate ventilation (S.4)	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—
Sanitary Conveniences (S.7):—				
(a) Insufficient	1	2	—	—
(b) Unsuitable or defective ...	34	38	—	3
(c) Not separate for sexes... ..	—	—	—	—
Other offences against the Act (not including offences relating to Outwork)	—	—	—	—
Totals	35	40	—	3

Outwork

Wearing apparel-making, etc.	Number of outworkers in Aug. list required by section 110 (i) (c)	2
Visits made		2

WATER SUPPLY

Town Area Supply

Quantity

The total consumption of water in the town area represented 39.0 gallons per head per day, of which 29.7 was for domestic purposes, 0.3 gallons for shipping, 8.8 gallons for industry and commerce, and for the Cleansing Department 0.02 gallons.

Source and Treatment

Water is obtained from three sources — a bulk supply from Birkenhead Corporation's Lake Alwen, a supply from the River Dee works owned jointly by Birkenhead and Wallasey Corporations and the remainder obtained from deep boreholes within the borough.

The borehole water is softened by the base exchange process and chlorinated. The Alwen bulk supply is treated by the Birkenhead Corporation before delivery. This treatment includes coagulation, filtration, pH correction and chloramine dosing. The River Dee supply receives similar treatment except that sterilisation is by superchlorination and dechlorination. Activated carbon treatment is used as necessary to control tastes.

There are no houses in the Borough without a piped supply, but six bungalows at "Castlefields," Ditton Lane, are supplied by means of a standpipe.

CHEMICAL AND BACTERIOLOGICAL EXAMINATION

123 samples were submitted to bacteriological examination by the Water Department, of these 3 gave presumptive positive tests, but confirmatory tests showed that all were of the non-faecal type.

14 samples were submitted to routine chemical analysis by the Water Department.

Details of typical chemical analysis are given below.

The water supply of the area has been satisfactory, both as to quality and quantity.

Lead was not found in any of the 52 samples of water tested during the year.

	<i>District "A"</i>	<i>District "B"</i>
Free Amonia ... ..	.006	.028
Albuminoid Ammonia ... ..	.032	.028
Nitrate Nitrogen ... ..	.75	.32
Nitrite Nitrogen	Nil	Nil
Free Chlorine	Nil	Nil
Combined Residual Chlorine	.01	.01
Lead	Nil	Nil
Iron	Nil	Nil
Copper	Nil	Nil
pH value	6.9	7.5
Colour Less than	5°	Less than 5°
Oxygen absorbed at 37°C. in 4 hours ... ..	.4	1.0
Total dissolved solids	336	112
Temporary Hardness	24	2
Total Hardness	104	52
Total Chlorides	102	15

Results in parts per million.

Water supplied in Wallasey, except Seacombe and Poulton.
Water supplied in Poulton, Seacombe, Moreton and Leasowe.

Results of 20 samples taken by public health inspectors of untreated water at the borehole in Seaview Road and submitted to the Public Health Laboratory Service are as follows : —

Details of Bacteriological Samples

TOWN AREA SUPPLY
(i) Borehole at Seaview Road

No. of Organisms	No. of Samples		
	1 day at 37° C.	Pres. Coli.	Bact. Coli. (type 1)
0	19	20	20
1—4	1	—	—
5—9	—	—	—
10—20	—	—	—
21—50	—	—	—
	20	20	20

31 samples were taken by public health inspectors from taps of premises within the town area.

A summary of the results is given in the following table :—

(ii) Random Distribution Points

No. of Organisms	No. of Samples		
	1 day at 37°C.	Pres. Coli.	Bact. Coli. (type 1)
0	25	28	31
1—4	6	3	—
5—9	—	—	—
10—20	—	—	—
21—50	—	—	—
	31	31	31

One sample of the town supply taken by a public health inspector was submitted for full chemical examination. The result was as follows: —

Analytical results expressed in parts per million: —

Total solid matter in solution	115.6
Oxygen required to oxidise in 15 minutes	0.79
4 hours	1.12

Ammoniacal nitrogen as N.	0.03
Albuminoid nitrogen as N.	0.05
Nitrous nitrogen as N.	None
Nitric nitrogen as N.	None
Combined chlorine	18.8
Total Hardness	49.0

pH value 7.4

The water was found to be free from pollution and suitable for drinking and domestic purposes.

Saughall Massie Supply

Dwelling houses in the extreme western end of the borough receive their water supply from the West Cheshire Water Board. This water is obtained from deep wells at the Board's pumping stations and river supply taken from the River Dee at Chester and treated at the Board's Sutton Hall Treatment Works, Great Sutton. On the basis of consumption throughout the entire area supplied by the Board, the total consumption per head per day is 56 gallons, of which 33 gallons are for domestic purposes and 23 gallons are for industry and commerce.

During the year 64 samples of water from the pumping stations were submitted by the Board to the Counties Public Health Laboratories, London, S.W.1, for bacteriological examination.

The following table gives a summary of the results of the 23 samples taken from the Prenton Pumping Station.

No. of Colonies (on Agar)	No. of Samples		
	3 days at 20°C.	1 day at 37°C.	2 days at 37°C.
0	3	20	15
1—4	13	2	7
5—9	4	—	—
10—20	2	1	1
21—50	1	—	—
	23	23	23

An average of three chemical examinations of the water taken from Prenton Pumping Station is as follows (results in parts per million):—

Appearance	Clear—Bright
Colour	Nil
Turbidity	1
Odour	Very slightly Chlorinous
pH reaction	7.2
Electric conductivity	590.0
Chlorine present as Chloride	80.66

Hardness : Non-carbonate	70.0
Carbonate	180.0
Total Hardness	250.0
Nitrate Nitrogen	3.9
Ammoniacal Nitrogen	0.0166
Albuminoid Nitrogen	0.000
Free Carbon Dioxide	22.333
Total Solids	393.333
Alkalinity as Calcium Carbonate ...	180.0
Nitrate Nitrogen	0.003
Oxygen absorbed	0.116
Residual Chlorine	0.016
Iron	Absent
Zinc	Absent
Manganese	Absent
Other Metals	Absent

During the year 21 samples of water were taken by public health inspectors and submitted to the Public Health Laboratory for bacteriological examination.

Details of Bacteriological Samples

West Cheshire Water Board
*Samples taken by public health inspectors
at selected distribution points*

No. of Organisms	No. of Samples		
	1 day at 37°C.	Pres. Coli.	Bact. Coli. (type 1)
0	17	20	21
1—4	3	1	—
5—9	—	—	—
10—20	1	—	—
21—50	—	—	—
51—100	—	—	—
	21	21	21

One sample of water supplied by the West Cheshire Water Board was taken by a public health inspector and submitted for full chemical examination. The result was as follows:—

Analytical results expressed in parts per million:—

Total solid matter in solution	293.4
Oxygen required to oxidise in 15 minutes	0.30
4 hours	0.45
Ammoniacal nitrogen as N.	None
Albuminoid nitrogen as N.	None
Nitrous nitrogen as N.	None
Nitric nitrogen as N.	2.8
Combined chlorine	55.2

Total hardness	169.0
Hardness (non-Carbonate)	59
Hardness (Carbonate)	110

pH value 7.4

The water is quite fit for drinking and all domestic purposes.

SEWERAGE AND DRAINAGE

House Drainage

Visits by public health inspectors in connection with same	650
Drains cleansed from obstruction after service of notice ...	99
Drains repaired or renewed	17
Drain Tests :	47
Offensive Accumulations and Ditches: Nuisances Abated	20

The following sewerage works have been carried out during the year 1960:—

- (1) A 9" diameter storm relief sewer 50 yards in length was constructed in Princesway at a cost of £500.
- (2) A 9" diameter storm relief sewer 200 yards in length was constructed from Winterhey Avenue to Gorsey Lane at a cost of £1,300.
- (3) The existing sewer in Union Street 400 yards in length was reconstructed at a cost of £4,500.
- (4) Extensive repairs were carried out to the 24" dia. North Wirral Outfall Sewer at a cost of £2,400.
- (5) The water course on the west side of the railway from Wallasey Village Station has been improved and the culvert under School Lane enlarged at a cost of £300.

Difficulties occur from time to time in the following areas as a result of inadequate sewer capacity:—

Wallasey Village.

North Wirral outfall area of Moreton.

Central area of Liscard and Poulton.

The Wallasey Village area was the subject of a consultant's report this year. As a result of this report, the Council decided to improve the drainage in this area by a number of stages. The first stage which includes the area to the west of Wallasey Village Station, is in course of preparation.

All development in the North Wirral outfall area of Moreton has been held up for a number of years due to inadequate drainage facilities. A scheme prepared by consultants on behalf of the four Authorities concerned recommended a new outfall into the Dee but this has met with opposition on pollution grounds. It seems likely that the final scheme will include facilities for sewage treatment and disposal.

In times of severe storms, certain isolated flooding occurs in the central area of Liscard and Poulton and preliminary surveys are to be made to ascertain the real extent of the problem.

RODENT CONTROL

Sewer Maintenance Treatments

Two routine sewer maintenance treatments were again carried out using zinc phosphide and arsenic as the rodenticides. In addition, a further sewer treatment was carried out using Warfarin.

Prior to the first routine treatment involving the use of zinc phosphide, a 10% test baiting of 581 manholes was undertaken. The number of takes—10 complete and 10 partial—is a measure of the success of the work previously done. 91 manholes were baited as a result of the test and 6 partial takes were recorded. The second routine treatment involved baiting 91 manholes. No takes were recorded.

241 manholes were treated with Warfarin and no takes were recorded.

Surface Infestations

During the year 452 complaints of surface infestation were received compared with 400 in 1959. Details of the inspections and treatments carried out are given overleaf in the form required by the Ministry of Agriculture, Fisheries and Food. 537 separate treatments were carried out at 457 premises by rodent operatives of the Public Health Department. 392 of these premises were treated once in the year, while reinfestation involving two treatments occurred in 56 premises; three treatments were required at 4 premises, four treatments at 4 premises and 5 treatments at 1 premises. The multiple treatments were invariably due to reinfestations. Warfarin has come to be accepted as the basic rat poison. During the year it was used in all of the 537 treatments by council rodent operatives. Re-inspections have been carried out on the first third, seventh, eleventh and fourteenth days, a system which was discussed in the annual report for 1952.

	Type of Property				
	Local Authority	Dwelling-houses	Agri-cultural	All other (incl. Business & Industrial)	Total
Total number of properties in Local Authority's District ...	355	30,761	55	3,973	35,144
I. Number of properties inspected by the Local Authority as a result of (a) notification or (b) survey under Damage by Pests Act (c) otherwise, i.e. when visited primarily for some other purpose ...	(a) 26	341	3	82	452
	(b) 8	554	1	74	637
	(c) 382	17,304	Nil	6,860	24,546
I. Number of properties (under II) found to be infested by rats ...	Major Nil	Nil	Nil	1	1
	Minor 10	135	2	31	178
I. Number of properties (under II) found to be seriously infested by mice ...	23	214	Nil	53	290
Number of infested properties (under III & IV) treated by the Local Authority ...	33	344	2	78	457
I. Number of notices served under Section 4: (1) Treatment ... (2) Structural Works (i.e., Proofing)...	Nil	Nil	Nil	Nil	Nil
	Nil	Nil	Nil	Nil	Nil
	Nil	Nil	Nil	Nil	Nil
Total ...	Nil	Nil	Nil	Nil	Nil
I. Number of cases in which default action was taken by Local Authority following issue of notice under Section 4	Nil	Nil	Nil	Nil	Nil
II. Legal Proceedings ...	Nil	Nil	Nil	Nil	Nil
Numbers of "block" control schemes carried out ...	—	—	—	—	3

NOTES

Note 1. A property means a property separately entered in the Valuation Roll for the area.

Note 2. Council houses are included under Dwelling Houses. Premises used by Local Authority for purposes of trade are included under Business or Industrial Premises.

Sewers are not included.

Only properties devoted to agricultural or horticultural production are included under Agricultural Properties. Combined dwelling and business premises where occupied by the same person are included under Business Premises, otherwise they are entered separately.

Note 3. II, III, IV and V excepting II (c) relate to the number of properties inspected as defined in Note 1 and not to the number of inspections, infestations or treatment at each property.

PUBLIC HEALTH CONTROL OF SWIMMING POOLS

Swimming facilities in Wallasey include the indoor baths at Guinea Gap, the outdoor pools at New Brighton and Harrison Drive. In each case, sea water is used, the water being pumped from the River Mersey for Guinea Gap Baths, from the Marine Lake for New Brighton Pool and from the Irish Sea for the Derby Bathing Pool. During operation, the swimming bath water undergoes a constant filtration process utilising Bell's Gravity Filters and modern chlorination equipment is used to ensure a safe and sterile water. The turnover period at Guinea Gap is once every three hours and at the two outdoor pools once every five hours. Guinea Gap Baths remain open for public use throughout the year and the water is heated; the two outdoor pools are only in use during the summer months and the water is not heated.

49 visits of inspection were made to the council's swimming baths by public health inspectors, compared with 80 in 1959. Tests for residual chlorine amounted to 33. Samples for bacteriological examination numbered 130, or 21 less than during the previous year.

At Guinea Gap first class bath 8 tests for chlorine were made, the average result being 0.6 parts per million at the inlet and 0.44 parts per million at the outlet. The corresponding averages of 8 tests at the 2nd class bath were 0.75 and 0.63 parts per million.

The maintenance of residual chlorine in the open air pools at New Brighton and Harrison Drive is more difficult. At New Brighton pool the average of 8 checks gives inlet contents of 0.27 parts per million on the east side and 0.33 on the west side, with only 0.15 at the outlet. At Derby Pool 9 tests were done and the average residual chlorine was 1.0 and 0.35 parts per million at the inlet and centre of the pool, with only a trace at the outlet. The results of the chlorine tests at the different pools are consistent with the results of bacteriological examinations of the water, details of which are tabulated below:—

Derby Pool

No. of Organisms	No. of Samples		
	1 day at 37°C.	Pres. Coli.	Bact. Coli. (type 1)
0	3	12	13
1—4	7	7	6
5—9	3	1	1
10—19	3	—	—
20—49	2	—	—
50—99	1	—	—
100+	1	—	—
	20	20	20

New Brighton Pool

No. of Organisms	No. of Samples		
	1 day at 37° C.	Pres. Coli.	Bact. Coli. (type 1)
0	8	18	18
1—4	4	—	—
5—9	2	—	—
10—19	2	—	—
20—50	1	—	—
Uncountable	1	—	—
	18	18	18

Guinea Gap Baths

No. of Organisms	No. of Samples		
	1 day at 37°C.	Pres. Coli.	Bact. Coli. (type 1)
0	27	83	86
1—4	23	7	5
5—9	14	2	1
10—19	10	—	—
20—49	8	—	—
50—99	6	—	—
136	2	—	—
300	2	—	—
	92	92	92

Chemical Examination — Specimen Analysis**Guinea Gap 2nd Class Bath**

Analytical results expressed in parts per million :—

Total solid matter in solution	26,602.0
Oxygen required to oxidise in 15 minutes	0.37
4 hours	0.67
Albuminoid nitrogen as N.	0.01
Ammoniacal nitrogen as N.	0.15
Nitrous nitrogen as N.	None
Nitric nitrogen as N.	None
Combined chlorine	14,500.0
Free Chlorine	0.60
pH value	7.9

This water is quite satisfactory for swimming bath purposes.

AIR POLLUTION

Summary of Observations and Visits

Clean Air :

Industrial Observations — Formal	80
Industrial Observations — Informal	263
Industrial Visits	106
Domestic Observations	87
Domestic Visits	977
Other Visits to Smoke Control Areas	216
Other Visits to Proposed Smoke Control Areas ...	6,628
Visits to Deposit Gauges	69

Measurement of Air Pollution

It is difficult to exaggerate the importance of the scientific measurement of air pollution, for this reveals not only monthly and seasonal variations, but long-term changes as well. The readings from a sufficient number of gauges and instruments allow the size of the problem to be appraised and compared and the effects of abatement programmes measured. About seven in every eight of the "black area" authorities maintain measuring apparatus; in "other areas" less than half do so. In Wallasey four deposit gauges are maintained for the measurement of soot-fall, and five gauges for measuring the concentration of sulphur in the atmosphere.

TABLE 1

Station	Rainfall		Total Dissolved Matter		Total Undissolved Matter		Total Solids	
	M.M.		Tons per sq. mile per month					
	Wint.	Sum.	Wint.	Sum.	Wint.	Sum.	Wint.	Sum.
Oakdale Road Oct., 1959— March, 1960	88.1		13.14		14.77		27.91	
April, 1960— Sept., 1960		65.6		7.09		11.46		18.55
Gorsedale Road School Oct., 1959— March, 1960	80.8		10.7		11.36		22.06	
April, 1960— Sept., 1960		61.1		6.97		8.01		14.98
Saughall Massie Oct., 1959— March, 1960	79.3		9.64		4.17		13.81	
April, 1960— Sept., 1960		60.6		3.80		1.48		5.28
Seaview Road Oct., 1959— March, 1960	81.6		12.06		8.70		20.76	
April, 1960— Sept., 1960		68.5		7.84		6.46		14.30

Table 2

Mean Monthly Rates of Total Deposits for Winter and Summer Periods
October, 1959—September, 1960

Town	Station	Total Solids	
		Tons per sq. mile per month	
		Winter	Summer
Warrasey	Oakdale Road	27.91	18.55
	Gorsedale Road School	22.06	14.98
	Saughall Massie	13.81	5.28
Manchester	Seaview Road	20.76	14.30
Liverpool	Philips Park	29.41	25.02
Warrington	Aigburth Vale	11.68	10.63
	Rea Barn	12.90	4.80

Table 3

Estimation of Sulphur Dioxide by the Lead Peroxide Method for
Winter and Summer Periods, October, 1959—September, 1960.

Rate of Absorption of Sulphur Dioxide expressed as

Mg. SO³/day/100 Cm²

Station	Winter Period	Summer Period	Oct., 1959 Sept., 1960
Oakdale Road Oct., 1959—March, 1960 April 1960—September, 1960	3.560	1.501	2.530
Gorsedale Road School Oct., 1959—March, 1960 April, 1960—September, 1960	3.542	1.737	2.639
Saughall Massie Oct., 1959—March, 1960 April, 1960—September, 1960	1.304	0.762	1.033
Seaview Road Oct., 1959—March, 1960 April, 1960—September, 1960	3.470	1.428	2.449
Town Hall, Wallasey Oct., 1959—March, 1960 April, 1960—September, 1960	8.786	3.090	5.938
Bitterne Reservoir, Southampton Oct., 1959—March, 1960 April, 1960—September, 1960	0.97	0.56	0.765

NOTE

- (1) In the above classification the figure for the winter period consists of an average of the recordings for the months of October, 1959, to March, 1960. The figure for the summer period consist of an average of the recordings for the months of April, 1960, to September 1960.
- (2) The Philips Park Station records the greatest degree of pollution of a number of stations in Manchester; it is situated in close proximity to large scale electricity, gas and colliery undertakings in addition to many other works from which atmospheric pollution may arise.

Average Total Deposit Per Square Mile of the Borough Per Year
October, 1959—September, 1960—206.47 tons

Smoke Control Areas

The general development of the Council's policy in relation to this relatively new and important subject has been reviewed in my Introduction. Wallasey now has five confirmed Smoke Control Orders, as follows:—

Scheme No.	Order No.	Name and Date	Acres	No. of Dwellings	No. of other Premises	Date of Operation	Stage of Development
1	1	The Wallasey (Church St.) Smoke Control Order No. 1, 1958	11	218 (when completed)	4	1.10.1959	Operative
2	2	The Wallasey (Moreton) Smoke Control Order No. 2, 1959	125	1,070	25	1.9.1960	Operative
3	3	The Wallasey (Upton Rd.) Smoke Control Order No. 3, 1959	31	241 (when completed)	6 (when completed)	1.10.1960	Operative
4	4	The Wallasey (Fender Lane) Smoke Control Order No. 4, 1960	340	250 (when completed)	1	1. 2.1961	Confirmed by Minister of Housing and Local Government
5	5	The Wallasey (Brighton St.) Smoke Control Order No. 5, 1960	107	1,343	241	1. 5.1962	Ditto.
6 { 7	6	The Wallasey (Leasowe) Smoke Control Order No. 6, 1960	1,920	3,247	70	1. 9.1962 (proposed)	Awaiting confirmation by Minister of Health and Local Government
8	—	Town Meadow Lane	335	1,581	30	—	Survey in progress
9	—	Poulton Road	710	6,215	501	—	Ditto.
10	—	New Brighton	329	2,683	342	—	Ministry approached for preliminary approval
11	—	Upton Park	93	22	—	—	Ditto.

During the year initial surveys were completed on 5,828 dwelling-houses and 544 other premises.

Publicity

Publicity for the Clean Air Programme was arranged in the form of a mobile exhibition from the Solid Smokeless Fuels Federation at four separate sites in the borough, a demonstration house run by the North Western Gas Board at Hoylake Road and shop window displays at premises in Liscard Village, Poulton Road and Victoria Road. A number of talks on Clean Air were given to various organisations in the town.

Contraventions

Verbal and/or written warnings of first contraventions of smoke control orders were issued to 32 premises. In no case has a second contravention occurred.

The nature of the various offences was as follows:—

Burning of coal	9
Burning of wood and paper	13
Burning of kitchen waste refuse	6
Not known (due to not being able to get into premises)	4

Industry

During the year 11 complaints of industrial pollution were received and fully investigated. Five applications for prior approval of fuel burning installations were received, three of which were for oil-fired equipment and two for coke fired equipment. All proposals were approved.

DISINFESTATION

Benzine hexachloride in kerosene has been used for the majority of infestations of cockroaches. In addition to the work done by the Corporation's operator, details of which are set out below, surveillance was exercised over the hydrogen cyanide fumigation of a flour mill.

Disinfestation

Inspections

(1) No. of complaints investigated	252
(2) No. of private houses inspected as a result of (1)	103
(3) No. of local authority houses inspected as a result of (1)	105
(4) No of premises other than dwelling houses inspected as a result of (1)	44
(5) No of premises found to be verminous :	
(a) Bed Bugs	38
(b) Fleas	11
(c) Cockroaches	141
(d) Other Vermin	62
	<hr/> 252

Notices Served and Abated

	<i>Served</i>	<i>Treated By L.A.</i>	<i>Abated Privately</i>
(6) Total No. of notices to disinfect given verbally	3	—	3
(7) Total No. of preliminary notices in writing	Nil	—	—
(8) Total No. of statutory notices	Nil	—	—
	<hr/> 3 <hr/>	<hr/> — <hr/>	<hr/> 3 <hr/>

Treatment by Council's Operative

(9) No. of treatments on repayment	442
(10) No. of treatments without charge	2
(11) Total No. of treatments	<hr/> 444 <hr/>
(12) No. of premises covered by treatments outlined in (11)	<hr/> 252 <hr/>
(13) No. of treatments with D.D.T. spray	80
(14) No. of treatments with other spray insecticides	364
(15) No. of treatments with other methods	Nil
	<hr/> 444 <hr/>
(16) Fees received, £245 6s. 1d.	

RAG FLOCK AND OTHER FILLING MATERIALS ACT

During the year 4 samples were submitted to prescribed analysis, and were found to comply with the prescribed standards of cleanliness.

Type of Filling Material

<i>B.S.S. 1425: 1951</i>	<i>No. of Samples</i>
Cotton Felt	2
Rag Flock	—
Washed Flock	1
Coir Fibre	1
<i>B.S.S. 1762: 1951</i>	
Woollen Mixture Felt	—

Six premises are registered under the Act. In the main they are occupied by upholsterers whose main business is the repair or refilling of upholstered articles of furniture.

CONTROL OF CAMPING

89 visits were made to licensed sites during the year.

Seven private sites were licensed from the end of March until the first week in October. In addition to the above, branches of the Caravan Club held two camps on land situated on the promenade which is owned by the Corporation.

No. of licences relating to sites issued during 1960 ...	7
No. of licences relating to sites refused during 1960 ...	Nil
No. of cases of unlicensed camping detected during 1960	4
No. of visits to unlicensed land	38
No. of visits to licensed land	89
Inspection of structures	2,449
Nuisances abated after notice	—

Site licences were issued under the Caravan Sites and Control of Development Act, 1960, in respect of four caravan sites in the borough, new standards being laid down to improve amenities of these sites.

KEEPING OF ANIMALS AND PET SHOPS

The total number of pet shops is 15, which is a disproportionately high number for the size of the town. All the licences are subject to standard conditions approved by the Council. These conditions are based on local conditions, regard having been paid to recommendations of the Association of Municipal Corporations and the R.S.P.C.A.

Visits to pet shops	22
Visits to other premises	49
Animal nuisances abated	3

MISCELLANEOUS INSPECTIONS

	<i>Visits</i>	<i>Nuisances Abated</i>
Schools	72	—
Cinemas, dance halls, etc.	17	1
Sub-let rooms	284	—
Public conveniences	171	2
Local Land Charges (search)	1,831	—
Measurements of rooms for permitted numbers	409	
Interviews with building contractors	416	
Offensive trades	14	
Other Visits	6,465	

WALLASEY CORPORATION ACT, 1958

Registration of Hairdressers

During the year 22 applications were granted for the registration of premises for use as hairdressing establishments there being a total of 110 premises registered within the borough.

GO KART RACING

Complaints were received from the residents of houses adjacent to New Brighton Tower grounds regarding excessive noise and fumes from go karts, which are miniature two-stroke racing cars. Observations were kept at each meeting following the complaints and every attempt was made to minimise the noise, including the withdrawal, during the races, of cars which were found to have inefficient silencers.

PART VI.

Welfare Services
(*National Assistance Act, 1948*)

WELFARE SERVICES

Residential Accommodation

The Welfare Committee's three Hostels for Old People, "Lamorna" "Redcliffe" and "Newholme" were again full throughout the year, any vacancies being filled immediately.

At the end of the year there were 96 persons on the Waiting List for Hostel accommodation compared with 105 at the beginning. This would appear to be a slight improvement, but even so, efforts must not be relaxed to provide more accommodation for old people.

To this end the opening in 1961 of the 2 hostels envisaged in last year's Report will take place. One of these, a 50-bedded hostel which will be for the more infirm type of old person, should be the first to open, with the other Hostel, an 18-bedded one for old persons, shortly after.

The following are the statistics relating to accommodation provided by or on behalf of the Council in 1960.

	No. resident on 1.1.60	Admissions during 1960	Discharges during 1960	No. resident on 31.12.60
"Newholme"	45	7	9	43
"Lamorna"	19	13	12	20
"Redcliffe"	17	11	11	17
David Lewis Epileptic Colony	3	1	1	3
Home for Epileptics, Maghull	6	1	1	6
Turner Memorial Home of				
Rest for Cripples, Liverpool	6	2	2	6
Maryland, Formby	1	—	1	—
Holm Hill, West Kirby	3	—	2	1
Old Peoples' Hostel, L'pool	1	—	—	1
Leeds House, New Brighton	1	—	—	1
"Springhill," Nelson	1	—	—	1
Middleton Home for the				
Blind, Maldon, Essex	1	—	—	1
Charles Best House				
(Diabetics), Parkgate	1	2	2	1
St. Vincent's Hospice, L'pool	1	—	—	1
Tithebarn Home, Crosby ...	1	—	—	1
British Legion Home, Cromer,				
Norfolk	1	—	—	1
Methodist Home for Aged,				
Fulwood Park, Liverpool	1	—	—	1
Royal Alfred Home for Aged				
Seamen, Belvedere, Kent ...	—	1	—	1
Alexian Brothers' Home,				
Moston, Manchester	—	1	—	1
R.N.I.B. Oldbury Grange,				
Bridgenorth	—	1	1	—
R.N.I.B., Torquay	—	1	1	—
Reception Centre,				
Martins Lane	11	110	104	17
4, Tower Street, Lower Flat	5	10	9	6
4, Tower Street, Upper Flat	3	2	—	5

8, Tower Street, Lower Flat	6	3	6	3
8, Tower Street, Upper Flat	4	—	—	4
8, Church Road, Flat A	6	5	6	5
8, Church Road, Flat B	3	—	—	3
8, Church Road, Flat C	5	—	—	5
10, Church Road, Flat A ...	6	—	—	6
10, Church Road, Flat B ...	5	—	—	5
10, Church Road, Flat C ...	6	8	6	8
Totals	169	179	174	174

Temporary Accommodation

Under the National Assistance Act, 1948, the Council is required to provide temporary accommodation for persons in need of same, e.g., in the case of evictions where the families concerned have found it impossible to obtain alternative housing.

The accommodation provided consists of (a) 10 sub-standard flats in Church Road and Tower Street, and (b) a Reception Centre for Homeless Persons at 51, Martins Lane.

All this accommodation has been fully utilised throughout the year. Immediately any flat became vacant it was occupied by a family in need of temporary accommodation.

The number of people accommodated at the Reception Centre in Martins Lane from the time of its opening in February, 1958, until the end of this year was 383, a figure which speaks for itself regarding the need for this type of accommodation.

It must be stressed that people living either in the flats or the Reception Centre must constantly try to obtain alternative accommodation.

15, Percy Road

The large family which took up residence at this address the year before last is still accommodated there. There would appear to be still no other accommodation available to house this family.

Registration of Old Persons' Homes

There were at the end of 1960 five homes in Wallasey registered under the provisions of the National Assistance Act, 1948.

Removal of Persons in need of Care and Attention (Section 47, National Assistance Act, 1948)

There were no removals under this heading during the year. The elderly women removed by Magistrate's Orders to Part III Accommodation in 1954 and 1959 respectively, are still accommodated.

Burial of the Dead

During the year 9 burials were carried out in cases where no other arrangements could be made. Of these, the costs of 3 were completely recovered, 5 were partly recovered, and the cost of the remaining one was borne entirely by the Welfare Committee.

Protection of Property

It is the duty of the Welfare Committee to ensure the safety of moveable property of persons when they enter homes or hospitals if no suitable arrangements are being made. This entails notifying the Police that the house is empty, checking that doors and windows are secure and possibly taking into protection valuables, cash or furniture.

All items except cash are stored at 114/116, Church Street, small items of value being kept in a safe. Cash is handed to the Borough Treasurer who places it in Suspense Account.

Occasionally advice is given to the relatives of mental patients on the procedure to be adopted when applying for appointment as Receiver of the Patient's Estate.

The Court of Protection and the Official Solicitor are notified of cases which may be their concern. Both these bodies are given any assistance they require in dealing with these cases.

Recovery of Expenses from Persons liable to maintain Dependents

It has not been necessary to apply to the Petty Sessional Court for any recovery of expenses during the year.

Entertainments and Outings

Due to the success of last year's Outing it was decided that this year's should be on the same lines. The Outing consisted of an afternoon coach tour of Wirral beauty spots, followed by a very enjoyable tea at Little Sutton from whence the party returned to Wallasey.

Christmas was again a happy time at the Hostels with the festive spirit much in evidence. Christmas Trees, Decorations, Turkeys, etc., all contributed to a general atmosphere of cheerfulness and goodwill.

As usual at Christmas and Harvest Festival time, and indeed throughout the year, gifts of fruit, flowers, sweets, reading matter, clothing and other articles for use by the residents were gratefully accepted from Schools, Churches, etc., and private individuals.

Community Welfare

Old people must once again be the focal point of this section of the Report.

Our thoughts must go out to those old people who, due to the lack of hostel accommodation, are managing somehow to carry on themselves. Of course there are also many old persons who prefer to be independent and manage to carry on living in their own homes.

It is very likely that these old people would appreciate outside assistance such as regular visits, shopping, and domestic work.

All the domiciliary services of the Health Department are available to old persons living in their own homes. During 1960/69,093 hours were devoted by the home help service to the old people in the borough.

The members of the Wallasey Voluntary Old Peoples' Welfare Committee and the Women's Voluntary Service carried out their usual excellent work throughout the year, but it is probable that more relatives and individuals could render valuable assistance to old people.

The Meals-on-Wheels Service again worked to full capacity during the year, providing meals for those in need.

The demand for Hostels for old people is still tremendous and the Welfare Committee is doing all it can to open further Hostels in the Borough.

Rehabilitation Work

During the year the Welfare Committee appointed, as a new venture, a Welfare Officer for Rehabilitation Work.

This Officer specialises in helping people who, often through circumstances beyond their control, need advice and practical help in matters such as eviction, pending evictions, rent arrears, household budgeting and so on.

The appointment has certainly proved itself worthwhile as the Officer concerned has been fully occupied ever since she took up her duties with the Welfare Section.

BLIND WELFARE

Registration of Blind Persons

During the twelve months ending 31st December, 1960, 45 people were examined by Mr. W. Dunlop Hamilton, and 1 through the Referee Services of the North Regional Association for the Blind, of these 20 were found to be blind.

Of the remaining 25, 12 were placed on the Observation Register for Partially Sighted, 12 re-examined and 1 was certified not blind.

Of the 20 certified blind, blindness occurred in the following age groups:—

[illegible]

Statement re : Incidence of Blindness in Registered New Cases

	Cause of Disability		
	<i>Glaucoma</i>	<i>Cataract</i>	<i>Others</i>
(i) Number of cases registered during the year for whom the following is recommended: —			
(a) No treatment	6	3	9
(b) Treatment (Medical, Surgical, Optical)	1	—	1
(ii) Number of cases registered during the year at (a) and (b) above, which, on follow-up action, have received treatment	1	—	1
<i>Ophthalmia Neonatorum</i>			
(i) Total number of cases notified during the year		Nil	
(ii) Number of cases in which: —		Nil	
(a) Vision lost		Nil	
(b) Vision impaired			
(c) Treatment continuing at end of year		Nil	
	<i>M.</i>	<i>F.</i>	<i>Total</i>
No. on Register at 1st January, 1960	108	144	252
No. added during year: —			
New Cases	7	13	20
Transfers from other Towns	1	5	6
	<hr/> 116	<hr/> 162	<hr/> 278
Less No. of Removals from Register owing to: —			
Leaving Wallasey	3	3	6
Deaths	13	14	27
	<hr/> 16	<hr/> 17	<hr/> 33
	<hr/> 100	<hr/> 145	<hr/> 245

From 1st January, to 31st December, 1960, two certificated Home Teachers were employed.

During the year 3,039 visits were made to Blind and Partially Sighted persons. In addition to these visits the Home Teachers attended 11 Social Functions given by organisations on behalf of the blind.

72 Classes for Occupational Therapy were held during the year. Afternoon and Evening classes are held in the Wallasey Spastic Centre and a keen interest is shown by all who attend.

The following crafts are taught: —

Seagrass seating; Somtwine seating; String bag making; Rug making; Basketry; Bath Mats; Knitting and Weaving.

At the annual Fete and Gala held at Central Park, Wallasey, in July, 1960, articles made by the blind were sold.

The Home Teachers have also taught Handicrafts, Braille and Moon to blind people in their homes.

Six blind people accompanied by one Home Teacher went to Manchester in May, 1960, to take part in the Annual Braille Reading Competition organised by the National Library for the Blind. One of the six was successful in winning a prize in the class for readers who have learnt Braille during the past five years.

Holidays have been arranged for a number of blind people to spend a week or fortnight in Holiday Homes for the Blind at Southport, Blackpool and New Brighton. One Home Teacher escorted six blind people for one week's holiday to the Blackpool Holiday Home and all had a wonderful time.

Training and Employment

A young man totally blind aged 22 years has been successful in passing the necessary examinations for admittance to a University and commenced at Liverpool University Faculty of Law in October, 1960. An application was made for a Guide Dog and after one month's training at Leamington Spa, the young man returned home the proud possessor of "Queenie" an Alsation dog who escorts her master to and from the University.

A totally blind baby, aged 1 year and 10 months, with his mother and 10-year-old sister, spent two weeks at The Parents' Unit, Royal National Institute for the Blind Nursery School for Children, Abbotskerswell, South Devon, where the mother received specialist instruction and derived much benefit from their stay. The maintenance charges were paid by the Local Authority.

A man who trained at the Royal National Institute for the Blind Training College to become a Shorthand Typist transferred to London during the year, and commenced work at the Royal National Institute for the Blind. His wife also registered blind and a trained telephonist has obtained employment near London.

A young man aged 27 years, was accepted for Social Rehabilitation at Torquay in March, and later transferred to Industrial Rehabilitation. On his return home he commenced as a Trainee in the Brush Making Department at the Liverpool Workshops for the Blind.

A young lady aged 25 years went for a three months' course of Social Rehabilitation to Oldbury Grange, Bridgnorth, and derived much benefit from it. She has a double handicap so is unable to be recommended for industry.

A young lady, aged 25 years, Partially Sighted, was re-examined at her request under the auspices of the Referee Services organised by the North Regional Association for the Blind, and was retained on the Partially Sighted Register.

Talking Book Machines

Four Talking Book Machines are distributed for blind people in their Homes for three monthly periods, and this service is greatly appreciated by all who participate.

Wireless Sets

The British Wireless for the Blind generously allocated 12 new V.H.F. Bush models and 2 Transistor sets for the Blind in Wallasey.

Free Travel Vouchers

Through the courtesy of the Passenger Transport Committee, Registered Blind persons still continue to receive travel vouchers enabling them to travel free on the Buses and Ferries.

During the year 1960 the Crosville Motor Bus Company kindly sent 18 bus passes at reduced rates for Wallasey blind persons.

The North Wales Steamship Company allowed the blind persons to travel on the Llandudno boats at a reduced rate. All these facilities are greatly appreciated.

Voluntary Organisations

A number of blind persons have benefited by the Meals-on-Wheels service organised by the Women's Voluntary Service.

The Women's Voluntary Service have also acted as escorts to the blind people.

The Voluntary Blind Welfare Committee hold weekly socials and organise an annual outing and a Christmas party for all the blind in Wallasey, the cost being subsidised by the Local Authority.

Thanks are due to all those Voluntary Agencies which have given their services to the blind in Wallasey, through Social Functions, Theatre Tickets, and gifts in the past twelve months, also to members of the Rotary Club who have conveyed many people to and from these functions.

Welfare Services for the Partially Sighted

National Assistance Act, 1948

There are 58 persons on the Observation Register for the Partially Sighted. During the year 88 visits were made to Partially Sighted Persons.

Persons on this Register are permitted to attend Handicraft Classes and Social Functions held for the blind.

WELFARE OF HANDICAPPED PERSONS

(Other than the Blind and Partially Sighted)

In November, 1960, the Minister of Health approved an amending scheme relating to the Provisions of Welfare Services for Handicapped Persons under the National Assistance Act, 1948 (Sections 29 and 30). It now includes under the heading of handicapped persons — any who are mentally disordered in any way and who are in need of assistance under this scheme.

During the year one Welfare Officer was employed. 728 domiciliary visits were made, 68 visits to social clubs and functions (many of which have been arranged through the Welfare Department) 28 escorts were provided to convey handicapped persons to hospitals and homes, and 28 Committee Meetings attended.

One Craft Teacher has been employed; handicraft classes have been held at Wallasey and Moreton, the numbers having increased from 12 and 8 to 27 and 22 respectively. Men and women of all ages have been taught basketry, tapestry work, making of lamp shades and sea-grass stools. The Wallasey Ambulance Service is called upon to convey the more severely handicapped to the classes.

Plans are being made by the Council for the acquisition of premises to be used as a Welfare Centre for Handicapped, where further classes and social events will be held.

Personal and domestic aids are supplied to individual cases to enable them to become more independent, and requests have been received for financial help over structural alterations to accommodate new and larger invalid tricycles supplied by the Ministry of Health. War Pensioners are now eligible for the provision of Mini-minor two-seater cars.

Close touch is kept with statutory and voluntary organisations concerned with the Welfare of the disabled in the district.

Permanent residence has been provided for handicapped persons at the following Homes:—

Turner Memorial Home of Rest, Liverpool	6 men
Maghull Homes for Epileptics, Lancs.	2 women
	4 men
David Lewis Epileptic Colony, Ches.	3 women
Charles Best House for Elderly Diabetics	1 man
British Legion Home, Norfolk	1 man
Alexian Brothers' Home, Manchester	1 man

Financial responsibility has been accepted in each case by the Welfare Committee.

There is a need for short term care for severely disabled people, and it is hoped that serious consideration will be given to this need which is likely to grow. Requests are received for care for the handicapped while parents have a much needed holiday and rest. Efforts are made to accommodate them in hospital wards, but it is not the ideal environment for the younger disabled in particular.

Rehabilitation, Training and Employment

Courses of industrial rehabilitation and training are provided by the Ministry of Labour and National Service at centres situated in various parts of the Country. Their aim is to restore a maximum degree of fitness for employment to persons, who because of sickness, accident or long unemployment need a chance to regain confidence in their ability to get and keep a job. The courses result in a large proportion being placed in open industry as well as sheltered employment. Experimental rehabilitation efforts are

now being made at various centres, and though there are difficulties with persons who have been mentally ill and suffer from handicaps such as Epilepsy, efforts to place these persons continue at all times.

Two young Wallasey Spastics have been admitted to National Spastics Society Training Centres and are making good progress.

The Wallasey Remploy Factory continues to employ its full quota of 60 in the manufacture of industrial gloves and aprons.

The Anne Glassey Workshop receives an annual grant from the Welfare Committee, and has six permanent employees who have recovered from tuberculosis. In addition they accept patients for courses in rehabilitation; their machine-knitted goods are excellent and are becoming well-known in the area.

The Sir Robert Jones Workshop, Liverpool, employs one Wallasey male epileptic as a poster compositor, his wages being subsidised by the Wallasey Welfare Committee.

At the 31st December, 1960, there were ten persons classified as unlikely to obtain employment in other than under sheltered conditions; this figure excludes men and women who are still in receipt of Sickness Benefit.

Voluntary Organisations for the Handicapped

The Liverpool Adult Deaf and Dumb Benevolent Society and the Catholic Deaf Society of St. Vincent de Paul receive a per capita grant from the Wallasey Council in respect of Wallasey deaf residents. The social centre at Princes Way, Liverpool, is available for all deaf in the area and the centre opened at Ashville Road, Birkenhead, is proving a welcome addition to services for the deaf. Meetings are held each Saturday evening and Wallasey residents are finding it more accessible and attending regularly.

The Wallasey Hard of Hearing Club is in its eleventh year; the members meet every Thursday evening at Hale Road, Wallasey, the premises being provided by the Local Authority. Outings and Social events are organised and many members have attended the short courses for the Hard of Hearing at Burton Manor.

The Wallasey Spastic Association hold three handicraft classes a week for the younger and adult spastics, the cost of their tuition being subsidised by the Local Authority Education Committee. They arranged and paid for a holiday for six adult spastics last summer.

The Welfare Committee assist and co-operate with the organisation of the Wirral Invalid Tricycle Association. Weekly social meetings are held at Penkett Road, the rent being met by the Local Authority. Motor coach outings and tricycle runs were successfully organised; the annual Christmas Dinner and Entertainment was a success, over 100 disabled attended.

The Wallasey Rotary Club kindly help with transport and this year presented a silver trophy as an award of merit to a member of the association.

The Meals-on-Wheels Service organised by the Women's Voluntary Service is beneficial to many handicapped homebound persons, and their Clothing Service is frequently called upon.

The Welfare Department is represented on the following Committees :—

- The Liverpool Adult Deaf and Dumb Society.
- The Catholic Deaf Society of St. Vincent de Paul.
- The Liverpool Council of Social Service.
- The Wallasey Disablement Advisory Committee
(Ministry of Labour).
- The Wallasey Spastic Association.
- The Wirral Invalid Tricycle Association.

Statistics of Registration

Registers of Handicapped Persons :—

		Under 16 yrs.	16—64 yrs.	65 years and over
Deaf	M.	—	28	6
	F.	—	25	4
Hard of Hearing ...	M.	—	12	6
	F.	—	11	4
General Classes ...	M.	3	553	45
	F.	1	202	10
		<hr/> 4	<hr/> 831	<hr/> 75
		Total 910		

Included in the General Classes above are Spastics and Epileptics over school age, i.e. :—

	Employed	Unemployed	In Homes	Total
<i>Spastics</i>				
Males	4	1	1	
Females	3	7	1	17
<i>Epileptics</i>				
Males	13	6	4	
Females	7	2	5	37

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COUNTY BOROUGH OF WALLASEY
EDUCATION COMMITTEE



Report

OF THE

Principal School Medical Officer
For the Year 1960

WINSTANLEY & WATKINS LTD.

1961

STAFF

Medical Officer of Health and Principal School Medical Officer :

Dr. H. W. HALL, M.B., Ch.B., D.P.H.

Deputy Medical Officer of Health and Deputy Principal School Medical Officer :

Dr. W. F. CHRISTIAN, M.B., Ch.B., D.P.H.

Assistant Medical Officers of Health and School Medical Officers :

Dr. E. J. O'REILLY, M.B., Ch.B., B.A.O.

Dr. ESMIE J. GRANT, M.R.C.S., L.R.C.P.

Principal School Dental Officer :

Mr. C. J. LUYA, L.D.S.

School Dental Officers :

Mr. W. A. HENDERSON, L.D.S.

Mr. E. G. MASON, L.D.S.

Mr. T. H. MOULDS, L.D.S.

(Part-time 11/4/60 - 3/12/60. Full-time 5/12/60).

Miss A. P. FARRELL, B.D.S. (Part-time appt. terminated 26/2/60).

Dental Attendants :

Mrs. E. M. BROWNE.

Miss P. BERGIN.

Mrs. U. BROWN. (Part-time 1/1/60 - 24/7/60. Full-time 25/7/60).

Mrs. A. HENDER. (Part-time 1/1/60 - 3/12/60. Full-time 5/12/60).

Miss J. ELLIS. (Res. 31/7/60).

Superintendent Health Visitor/School Nurse :

Mrs. K. SCHOFIELD, S.R.N., S.C.M., H.V. Certificate.

Health Visitors/School Nurses :

Miss E. A. TEGGINS, S.R.N., S.C.M., H.V. Certificate. (Res. 16/12/60).

Miss A. J. EDGE, S.R.N., S.C.M., H.V. Certificate.

Miss C. E. MURRELL, S.R.N., S.C.M., H.V. Certificate.

Mrs. E. E. P. NOLAN, S.R.N., S.C.M., H.V. Certificate.

Mrs. W. DOVEY, S.R.N., S.C.M., H.V. Certificate.

Miss M. E. ASPINALL, S.R.N., S.C.M., H.V. Certificate.

Miss E. M. MORGAN, S.R.N., S.C.M., H.V. Certificate.

Miss E. WHITBURN, S.R.N., S.C.M., H.V. Certificate.

Miss K. E. HIGGINS, S.R.N., S.C.M. (Part 1), H.V. Certificate.

Mrs. M. KEANE, S.R.N., S.C.M., H.V. Certificate.

Mrs. I. D. WINTERBURN, S.R.N., S.C.M. (Part 1), H.V. Certificate.

(Full-time 1/1/60 - 2/12/60. Part-time 3/12/60).

Mrs. M. E. GALLIMORE, S.R.N., S.C.M. (Part-time).

Mrs. E. SIMPSON, S.R.N., S.C.M. (Part 1), H.V. Certificate.

(Re-appointed 1/4/60).

Visiting Specialists :

Mr. J. D. ELLIOTT EDWARDS. M.B., Ch.B., D.O.M.S.

(Ophthalmic Specialist).

Mr. H. DAVIES, M.B., F.R.C.S. (Eng.), Ch.B., Ch.M. (Ortho.).

(Orthopaedic Specialist).

Dr. G. EGAN, M.D., Ch.B., D.P.M. (Psychiatrist).

Physiotherapists :

Mr. K. JONES. M.C.S.P.

Mrs. KERR, M.C.S.P. (Appointed 1/1/60).

Speech Therapist :

Mrs. M. B. AVISON (nec SMYTH). L.C.S.T.

Educational Psychologist :

Mr. J. MAGINN. B.A. (Hons.), Dip. Education, Dip. Ed. Psychology.

Social Worker :

Mrs. U. BARRETT-LENNARD. Diploma in Social Science.

Administrative Staff :

Mr. S. D. LAWSON.

Mrs. M. FRANCE.

Mrs. P. BEVERS (Res. 31/7/60).

Mrs. B. RADCLIFFE. (Part-time 1/2/60 - 31/7/60. Full-time 1/8/60).

Mrs. B. H. MAUNDER (Part-time).

Mrs. E. E. HILL (Appointed 19/9/60. Part-time).

Town Hall,

Wallasey.

May, 1961.

To: The Chairman and Members of the Education Committee.

Ladies and Gentlemen,

I have pleasure in submitting my Report on the School Health Service for the year 1960.

The report follows the usual pattern. Each School Medical Officer, Principal School Dental Officer and other members of the School Health Service have commented on the particular activities for which they are responsible.

The general health and development of the Wallasey School population has been maintained at a high level throughout the year. There were no serious outbreaks of infectious disease, and I am glad to say that Infective Hepatitis, which was prevalent in 1959, did not recur in 1960.

During the Autumn at the instigation of the Wallasey Executive Council and Local Dental Committee, a campaign was started to combat, by means of Health Education, the rate of decay of the School Children's teeth in the Borough. Interesting discussions took place in your Committee and in the Health Committee as to the best ways of achieving this end, and the Staff of the School Health Service, Medical Officers, Dental Officers and School Health Visitors have all taken part in the campaign as have many of the teaching staff. It is indeed encouraging to read the final paragraph of the Principal School Dental Officer's section of the Report.

Finally, I should like to put on record my appreciation of the support and interest in all matters relating shown by Mr. H. R. B. WOOD, who retired from the post of Director of Education at the end of August, and also to thank his successor, Mr. K. ROWLAND, and all Members of the Education Committee for their continued support and encouragement.

I am,

Your obedient Servant,

(Sgd.) HOWARD W. HALL,

Principal School Medical Officer.

ANNUAL REPORT : SCHOOL HEALTH SERVICE, 1960

The observations of Dr. Christian, Deputy Principal School

Medical Officer, are given below :—

The medical inspection of school children has continued in the same manner as last year with Entrants examined shortly after admission to Infants' Schools, the Intermediate group in their first year in the Senior Schools and Leavers shortly before leaving the Senior Schools.

The various reasons why it is more advantageous for the Intermediate (Other) inspections to be carried out in the Senior Schools were stated in my contribution to last year's Report.

The number of periodic inspections carried out during the year were as follows:—

Entrants	Leavers	Intermediate Group (Other)
1,741	1,247	1,624

In addition, Special Inspections (which include special cases seen at school at the request of the staff or the school nurse, together with cases seen for the first time by the school medical officers at the school clinics) numbered 1,616 during the year.

All children found at previous periodic inspections to have defects which required supervision were re-examined by the school medical officers at their schools. The number seen during the year was 358.

The general condition of the pupils examined at routine medical inspections was as follows:—

	Number	Percentage
Satisfactory	4,586	99.44
Unsatisfactory	26	.56

The two Day Special Schools were visited approximately once per month during the year — Elleray Park School by Dr. O'Reilly and Clare Mount School by myself. The children in attendance are examined shortly after admission and thereafter each year.

The Mental Health Act, 1959, in so far as it affects the School Health Service, came into operation on 1st November, 1960. The main changes introduced by the Act are as follows:—

(1) The Local Education Authority, after considering all available information, shall, if they are satisfied that a child cannot benefit from any form of education, record the fact that the child is "unsuitable for education at school" and not, as previously, as "incapable of receiving education at school or ineducable."

(2) The parents of such children have 21 days in which to appeal to the Minister of Education, whereas previously they were allowed only 14 days in which to appeal.

(3) The parents of any such child have the right to request the Local Education Authority to review the decision at any time after 12 months have expired since the decision, or any subsequent review of the decision, was made. Local Health Authorities can review the decision at any time. The parents have 21 days in which to appeal to the Minister against the review decision.

(4) A child can no longer be excluded from school on the ground "that it is inexpedient that he should be educated in association with other children." Such a child will, in future, have to be dealt with under the provision of Section 56 of the Education Act, 1944, which makes provision for education otherwise than at school.

(5) The Local Authority no longer have power to decide that a child on leaving school requires statutory supervision on account of mental subnormality. It is, nevertheless, still possible for informal supervision to be arranged for those children who are considered to require it. Such children, with poor employment prospects due to mental subnormality, would benefit from the facilities provided, or to be provided, by the Local Health Authority.

In last year's Report I discussed the problem of plantar warts or veruccae, and suggested that the best way of tackling the problem was to ensure more frequent foot inspections in order that children with veruccae may be excluded from swimming and school showers at an early stage of the infection, thus reducing the chances of spread to others. To enable more frequent inspections to take place, the Education Committee agreed to the appointment of an additional School Health Visitor, but, by the end of the year, this appointment had unfortunately not been made due to the absence of suitable applicants.

A retrospective enquiry was carried out during the year to try to find out the relative importance of the swimming baths and of pool plimsolls in schools as causes of infection. Altogether 162 children who had been treated at the clinics for plantar warts, were interviewed, 102 girls and 60 boys. Of these, 124 were regular attenders at the swimming pools, but only 22 had ever used pool plimsolls. As some of the latter group of children also went to the baths, it was clear that the main sources of plantar warts in Wallasey were the swimming baths. Incidentally, none of the children interviewed carried out gymnasium activities in bare feet.

In the Report of the Chief Medical Officer of the Ministry of Education covering the years 1958 and 1959, a chapter on plantar warts is included. It is stated in this chapter that experiments have shown that the incubation period, or the interval of time between acquiring the infection and the development of a wart, may vary from 6 weeks to 18 months. In the majority of cases, however, it is believed that the incubation period is between 3 to 6 months, or even longer. The chapter concludes with some remarks on prevention and emphasises the importance of regular inspection of school children's feet and the exclusion of affected children from swimming, showers, and barefoot activities until the condition is

cured. Other precautions advised are — enquiry of the school staff to see whether any members of the staff have plantar warts; treatment of warts on sites other than the feet; disinfection of the floors of changing rooms and shower baths.

Although the standard of nutrition of children has improved steadily since the war years, we still come across weedy, under-developed children who are said by their parents to be faddy with their food. Very often these children are also nervous or highly strung, and have been labelled as suffering from “cyclical vomiting.” Many of these cases have improved considerably from the courses of ultra violet light treatment which are held at the school clinics. Other cases which have benefited considerably are those with upper respiratory catarrh, bronchitis and general debility.

The work of medically examining children for their fitness to undertake employment out of school hours has continued. These examinations only very rarely bring to light conditions which might be aggravated by employment. The same can be said of the examinations of children who wish to take part in public entertainments, etc. The numbers examined in 1960 will be found on Page xxi of the Report.

Minor Ailments — Consultation Clinics

Minor Ailments Clinics are held at each of the School clinics as follows:—

Merton Road Clinic — Monday, Tuesday and Thursday mornings.

Water Street Clinic — Monday, Wednesday and Friday mornings.

Moreton Clinic — Monday to Friday mornings.

Dr. O'Reilly is in attendance at Water Street Clinic each Monday morning.

Dr. Grant is in attendance at the Moreton Clinic each Tuesday morning, and I am in attendance at Merton Road Clinic each Tuesday morning. At these doctors' sessions, medical and psychological problems, as distinct from minor ailments, can be investigated and appropriate advice or treatment given. Children found to need treatment for ocular or orthopaedic defects are referred to the Specialist Clinics held each week at the Merton Road or Moreton Clinics. At the latter clinics, children are only seen by appointment.

Immunisation

Immunisation Clinics are held at Merton Road Clinic on the afternoons of the first and third Wednesday of each month, and at Moreton Clinic on the afternoons of the second and fourth Friday of each month. These clinics can be visited without making an appointment. Vaccines are available to provide protection against Diphtheria, Whooping Cough, Tetanus and Poliomyelitis. The figures on Page xx of the Report relate to the total number of school children immunised during the year, both at Clinics and by private practitioners.

B.C.G. Vaccination

Vaccination of Contacts — In accordance with the Ministry of Health Circular No. 72/49, the vaccination of contacts of cases of tuberculosis is carried out by the medical staff of the Chest Clinic, Mill Lane. Two children developed Tuberculous Pleurisy during the year. All staff and pupils at the school involved were X-rayed but no case of Tuberculosis came to light. The school was thus exonerated as the source of infection.

Vaccination of School Children—In accordance with Ministry of Health Circular No. 22/53, as amended by Circular 7/59, the parents of children who are 13 years of age or older were asked to consent to vaccination of their children at school. The number of children tested for suitability for vaccination and the number actually vaccinated are given in the Table on page xx.

Ophthalmic Clinics

These clinics continue to carry out invaluable work in correcting visual defects in pre-school and school children. As will be seen from the Table on page xxix, 1,289 children were found to have errors of refraction during the year, while spectacles were prescribed for 832 children. Family doctors are informed when their patients are examined by the Visiting Specialist, Mr. Elliott Edwards.

Observations of Dr. O'Reilly, School Medical Officer:—

The picture of the health of the school children of the Borough is similar to that of the rest of the country, or perhaps a little better. One of the problems which has been cropping up most often recently is nocturnal enuresis, and it seems actually to be increasing. That impression, however, may be due to the gradual decrease or disappearance of some of the problems of the past. There is still no satisfactory treatment of the condition, though various methods are being constantly tried.

The overweight boy and girl, who we read about in the daily press, are also to be found in Wallasey, though not as abundantly as elsewhere, if we may judge by the reports of other local authorities. Luckily the remedy is definite and within the reach of all.

The audiometric survey has not been very satisfactory this year, as the present gramophone type of instrument is getting old and unreliable. We are expecting that a modern pure tone sweep test audiometer will soon be available.

Elleray Park Special School has produced the usual satisfactory results. Among the gratifying cases of improvement was a little boy who was sent to the school because he suffered from general ill-health and failed to make any progress in his previous school. Within a year, we were told, he had become bigger and stronger than his elder brother who was regarded as average. He has now returned to an ordinary school and should be well able to cope with any future vicissitudes.

Three other mothers have reported to the staff, in the last twelve months, that their boys in Elleray Park had progressed more rapidly than their brothers in ordinary schools. They specifically included scholastic as well as physical progress.

Another case, not untypical, is a spastic child who, a couple of years ago, was unable even to stand. He was moved around in a wheel chair and had to be carried upstairs. Now he can climb the stairs unaided. A tribute is due to the physiotherapists, whose devoted work is responsible for this victory.

The happy atmosphere of the school probably contributes largely to the excellent results. The children who are fit enough help those less fortunate, often just for encouragement. It is quite remarkable how genuinely pleased the others are when, for instance, a crippled child negotiates the difficult stairs for the first time. This is the antithesis of the usual behaviour of children who are commonly so cruel to the one with a stammer or a limp. The kindly and thoughtful attitude of the staff towards their charges is, of course, responsible for this admirable situation.

It is unfortunate that some prejudice exists against this school. Some parents think that there is a stigma attached to ill health, especially if it necessitates special schooling. Even some doctors advise parents against it. One doctor gave as his reason that all children should be treated as normally as possible. Actually the children in Elleray Park are treated just like that. The aim is to stretch them as fully as possible, having regard to the limited capacity of each individual, academic and physical. This personal attention is, of course, of supreme importance in activities such as swimming and games. In the matter of swimming, in order that the supervision should be the closest possible, the physiotherapist goes into the water with the children.

Some parents fear that attendance at a special school will antagonise possible employers, but, for those who spend only a small part of their school life at such an institution, the matter cannot arise very often. For those who spend their whole school life there, such as bad asthma and heart cases, the finding of suitable careers by the Headmaster is almost invariably successful, and it shows that the good work done by the school does not end when the children reach leaving age.

We are looking forward to the new school buildings, which should be a worthy setting for the excellent work being done.

Remarks of Dr. Grant, School Medical Officer:—

It is 50 years or more since the School Health Service was inaugurated and there has been surprisingly little change in its organisation during this period. Nevertheless, the recent report of the Chief Medical Officer of the Ministry of Education amply confirms that the health of children of school age has greatly improved, that schools are rarely the source for the spread of serious disease, that there is a better understanding of the problems

of handicapped children, and that the School Health Service has made its own distinct contribution to the improving health of the nation. In addition, every effort is being made by all Local Health Authorities to diagnose defective hearing in children at as early an age as possible, and to provide them with training and education at a time when they can most benefit. To this end, our Health Visitors have been given special demonstrations of the methods used to detect any impairment of hearing in the very young child, and if they find any such cases they refer them without delay, to the clinic doctor.

The prevention of mental ill-health in children is becoming more and more important, and it is, unfortunately, not uncommon to see one or two maladjusted children every week at the School Minor Ailment Clinics. Valuable help with these children is given by Dr. Egan and his team at the Child Guidance Clinic, but I think it is a significant sign of the times that so many children of school age require psychiatric treatment and cannot be controlled or disciplined by their parents.

Medical inspection of the girl leavers, usually at the age of 15, reveals the undue importance that is laid on fashions and cosmetics. The modern teenage schoolgirl is far too eager and impatient to exchange the sensible neat school uniform for the unsuitable, exaggerated garments that are so popular today. Frequently, at the medical inspection of this age group, one sees the remains of hastily removed nail varnish and lipstick, and even, on one occasion, when remarking on a case of inflamed eyelids, I was informed by the parent that it was due to the fact that the girl "made up" her eyes every week-end—and this statement, was made as though it were quite a natural and harmless pursuit!

Perhaps the worst feature of this desire to imitate her elders is the untold harm that is done by the wearing of fashionable shoes—casuals were bad enough, but now we see the even worse evil of the pointed court shoe with stiletto heels. Mothers do not seem able, or even anxious, to prevent this harmful custom—the reply usually given is that you can't blame the girl for wanting to wear what she sees all the others wearing; a few admit that they try, unsuccessfully, to persuade their daughters to buy or wear suitable shoes, but they have given up the uneven struggle. Because of this ever-growing custom, feet are fast becoming deformed, and made unsightly by corns, hammer-toes, hallux valgus and hardened blisters on the heels.

The headmistresses in some schools very wisely insist on certain types of shoes being banned during school hours, but this is not really enough to solve the problem — the manufacturers and the fashion experts are really to blame.

Apart from bad feet, the other most commonly encountered condition amongst children of all ages is chronic upper respiratory catarrh with its unpleasant sequelae of mouth breathing, impaired hearing, tonsillitis and chronic bronchitis. We can only hope that the cleaner air which we should shortly be breathing will, to some

extent anyway, lead to an improvement in this damaging complaint. Removal of tonsils and adenoids when recommended by the Ear, Nose and Throat surgeon does help considerably, and for less severe cases, deep breathing exercises, a course of artificial sunlight, vitamins and the use of decongestive nose drops are prescribed and give welcome relief.

Cleanliness of head, body and clothes has now reached a relatively high standard and I think that the School Health Service has done a lot to bring this about. Education was required as well as the improvement of social and economic conditions and I think the Health Visitors are to be congratulated on their hard campaign in this field — there will always be a few black sheep in every fold but this is inevitable even in the most perfect of Welfare States.

Sleep is still a vexed problem, and few parents seem to manage to get their children to bed at a reasonable hour. There are of course, far too many diversions these days, of which T.V. is naturally the most obvious.

Another problem in this era of liberal pocket money and higher standards of living is the obese child, especially of the female sex. It is difficult to persuade a growing child with a healthy appetite that too many sweets, chocolates, biscuits, cakes, bread and potatoes are the cause of her increasing adiposity, and that she should restrict these articles of food in her diet — they all seem to think they will lose these unwanted pounds as they get older but such, unfortunately, is not always the case.

Generally speaking, I think the School Health Service still has its part to play in the National Health Service, attending as it does to the positive mental and physical health of the younger members of the community. Without our team of medical officers, health visitors, physiotherapists, speech therapists, ophthalmologists and Child Guidance experts there would probably be a far larger number of sick patients filling the surgeries of the National Health Service practitioners.

I should like to take this opportunity, once again, of thanking the headmistresses of the schools I visit, for their hospitality and, in most cases, for their sincere desire to give us the best accommodation that is available, however inconvenient our presence. We know we are not always welcome, but we do our best to carry out our statutory duties with as little interference as possible in the school curriculum.

Report of Mr. H. Davies, Consulting Orthopaedic Surgeon on the work of the Orthopaedic School Clinics at Wallasey and Moreton in 1960.

The pattern of the Orthopaedic work done at the Wallasey:

and Moreton clinics during 1960 seems to have taken the form of remedying the acquired deformities of childhood. Congenital deformities and affections of bones and joints have been pleasingly rare, and the incidence of rickets, with which I was concerned last year, has also been low. There has also been a remarkable steady decline in the number of new cases of cerebral palsy, and another encouraging sign in the general good health of the children is that tuberculosis of the bones and joints has remained at its previous low level.

I feel much routine work on the part of the physiotherapists could be both avoided and helped by a more fervent and intelligent co-operation on the part of parents in the choice of shoes for their children, in regular attendances at the clinic for physiotherapy, and in encouraging their children to keep up their exercises daily at home. Shoes giving firm support are very necessary for growing children if we are to avoid the constant high totals of knock knees and flat feet which only lead on to the more serious foot problems of adult life. Wellingtons and pumps are not good when used as normal footwear and teachers and parents should encourage the children in their care to change into flat heeled lace up shoes at every opportunity.

I should like to thank the physiotherapists and auxiliary staff at these clinics for their unceasing help and co-operation, without which my own work could not be effective.

PHYSIOTHERAPY REPORT, 1960

Total Cases on Register:	3,062
Total Attendances:	8,467
New Cases on Register:	427
No. of Orthopaedic cases of school age treated:	1,402
No. of Orthopaedic Abnormalities treated at School:	22
New Orthopaedic Cases of School Age:	190
Orthopaedic Cases of School Age discharged: ...	133

Artificial Sunlight Report

New Cases:	122
No. of Cases on Register:	157
Discharged (Cured):	15
Discharged (Improved):	20
Discharged (No Change):	—
Left School:	3
Defaulters (and removed from Register):	60

The following observations are submitted by Mr. K. Jones, Physiotherapist:—

It is a coincidence that the number of defaulters in U.V.R. attendances is almost exactly the same as last year, despite a deplorable summer. Whereas one has inferred previously that parents consider a good summer an alternative to treatment, one is left this year with the suspicion that defaulting is due to slackness on the part of parents. (One also recalls the particular case of the parent who was dissuaded by the family doctor from attending as “artificial sunlight is old-fashioned” !)

It seems a pity that it is not more widely appreciated amongst Consultants and Family Doctors that in this area specialised treatment is given to cerebral palsy patients. The belief is common that little can be done for these children, and that treatment at Local Authority Clinics is semi-skilled in any case. (One is reminded of the consultant who persuaded a mother that she didn't need to bring her child for treatment as there was no supervision at the Clinics). I consider the enlightened approach with which this serious problem is addressed at the local clinics a cause for some satisfaction. There can be little disputing the fact that Bobath principles (based as they are on sound physiological and neurological research) offer the best hope of progress for “spastics”, and as far as one is aware, these methods are not widely known or practised in this area. It is difficult to suggest what form propaganda on this matter could take, but it is evident that some sort is needed. It is worth stressing again that treatment should commence as early as possible (6—12 months) in order that righting reflexes and equilibrium reactions, which may have established themselves in the baby, are not lost through the assumption of unsuitable postures, (premature sitting and standing, for instance). Frequency (as opposed to regularity) of treatment is not important. Mrs. Bobath recommends twice weekly treatments for strictly half hour intervals. At the Wallasey Local Authority Clinics parents of these distressingly handicapped children may be assured that the best modern treatment is available.

	Visiting Orthopaedic Surgeon's Clinic			Artificial Sunlight Clinic		Breathing Exs. for post-operative Tonsillectomy and Adenoidectomy		Asthma		Remedial Exercises	
	New Pts.	Total Arts.	Disch.	New	No. Trts.	New	No. Trts.	New	No. Trts.	New	No. Trts.
January ..	14	55	11	24	583	14	50	1	52	15	235
February ..	26	86	15	12	312	30	93	—	50	23	412
March ..	28	141	30	14	326	27	89	1	47	16	264
April ..	11	31	7	10	313	18	60	—	42	10	221
May.. ..	19	109	15	6	496	36	110	—	75	8	391
June.. ..	40	104	12	—	289	38	106	1	80	17	393
July	13	65	10	—	102	—	—	—	32	6	176
August ..	4	59	7	—	—	—	—	—	—	—	13
September ..	29	58	7	13	341	12	39	1	52	11	293
October ..	19	90	16	16	378	42	127	1	80	14	301
November ..	28	99	13	24	373	21	62	1	68	28	331
December ..	22	88	10	3	397	12	35	—	38	17	240
TOTALS..	253	985	153	122	3,910	250	771	6	616	165	3,270

REPORT of Mr. HORACE DAVIES, Orthopaedic Surgeon

Number of Sessions held at the Authority's Clinics ..	45
Number of New Cases	308
Number of Re-examinations	746
Number of Cases discharged cured	175

	Disease Categories	New Cases		Re-examinations		Discharged			
		Pre-Sch Age	School Age	Pre-Sch Age	School Age	Cured	Relieved	Left	Treatment Refused
		M. F.	M. F.	M. F.	M. F.				
Congenital Deformities	Trunk	—	—	1	—	—	—	—	—
	Upper Limb	1	2	—	—	—	—	—	—
	Lower Limb	1	1	1	2	2	4	2	2
Acquired Deformities	Flat Foot	9	2	51	82	16	11	162	154
	Hallux Valgus	—	—	—	5	—	—	4	13
	Postural Kyphosis and Scoliosis	—	1	1	8	—	—	7	15
	Knock Knee	34	29	12	4	64	53	40	36
	Bow Leg	—	2	1	—	—	3	2	1
	Other Conditions	6	2	12	18	6	6	47	46
Affections of Skeleton	Rickets	—	—	—	—	1	—	—	—
	Other Conditions	—	—	—	—	—	—	—	—
Affections of Nervous System	Spastic Paralysis	2	1	—	—	7	3	5	6
	Infantile Paralysis	—	—	1	—	—	—	—	—
	| Peripheral	—	—	—	—	—	—	—	—
	| Nerve Lesions	—	—	—	—	—	—	1	—
Affections of Bones	Osteomyelitis T.B.	—	—	—	—	—	—	—	—
	Other Conditions	—	—	—	—	—	—	2	2
Affections of Joints	T.B.	—	—	—	—	—	—	—	—
	Non-T.B.	—	—	1	—	—	—	—	—
Affections of Spine	T.B.	—	—	—	—	—	—	—	—
	Non-T.B.	—	—	—	2	—	—	—	—
Affections of Epiphysis		—	—	2	—	—	—	1	1
Affections of soft tissues		—	—	—	—	—	—	1	1
Complications of Trauma		—	—	—	3	—	—	2	7
Cases referred to Clinic and found normal		—	—	3	5	—	—	—	—

Dr. G. Egan, Consultant Psychiatrist, submits the following observations on the work of the Child Guidance Clinic:—

As Mr. Maginn has pointed out, the referral rate this year has increased by a considerable margin. For the clinic staff this has been gratifying. We have always felt that the low referral rate to the clinic merely meant that a number of schoolchildren in the Borough needing Child Guidance service were not having it because they were not being referred to us. Even this year's figure of 86 is a remarkably low one. A borough like Wallasey with a riverside population approaching urban slum conditions must inevitably have a high maladjustment rate amongst its schoolchildren. The Underwood Report indicates that in rural areas of England, where one would expect a high degree of stability, there is a maladjustment rate of between 5 and 10% in the schoolchild population. The referral rate to Wallasey Child Guidance Clinic is still under 1% of the school population.

We hope, therefore, that the increase for the year 1960 marks the beginning of a phase of greater awareness of the need for psychiatric attention for disturbed schoolchildren. We appreciate that there is a limit to the case load with which we can cope in our present premises, and with our present staff, but when the demand for our service reaches a truer and more realistic level there will be grounds for expanding the existing facilities.

In last year's report attention was drawn to the drop in the number of delinquent children referred to the clinic. This year's figures show that, as I anticipated, this was merely a freak occurrence, and the delinquency rate has again risen.

Mr. J. Maggin, Educational Psychologist, submits the following remarks on the Work of the Schools' Psychological Service, 1960:—

The increase in the number of new cases during the year is a pleasing indication that more of the behaviour disorders are being referred for specialist advice. The caseload has been dealt with successfully within our resources. The analysis of the sources of referral again gives preponderance to Head Teachers and the School Medical Officers. A small number were referred by parents and four out of the total number of 86 by other agencies.

An analysis of the work of the clinic is made below:—

Cases referred.

Current cases, January 1st, 1960	29
To be reviewed	4
New Cases, 1960	86
	<hr/>
	119
	<hr/>

The new cases were referred from the following sources, through either the Director of Education or the Principal School Medical Officer:

Head Teachers	50
Deputy and Assistant S.M.O.	24
Parent	8
Probation Officer	1
Family Doctor	0
Children's Officer	3
	<hr/>
	86
	<hr/>

The disposal of cases dealt with during the year falls under the following headings:

Cases closed:		81
Improved	46	
Report only ... ..	| 25	
Advice only ... ..	|	
School transfer	2	
Clare Mount	1	
Residential School	1	
In-patient Hospital Treatment	1	
Failed to co-operate	3	
Failed to respond to treatment	2	
To be reviewed		7
Current cases		31
		<hr/>
		119
		<hr/>

The diagnoses of cases referred during 1960 are classified below:

Delinquent tendencies	12
Emotional immaturity	3
Emotional instability	1
Habit disorders	7
Tension habits	4
Behaviour disorders	33
Truancy and non-attendance	6
Withdrawal symptoms	1
Phobic and anxiety states	5
Psychosomatic conditions	2
Lethargy and underfunctioning	12
	—
	86
	—

The work of the psychiatrist, psychologist and social worker is set out in the following tables:

Psychiatrist:

Diagnostic interviews	86
Treatment interviews	187
	—
	273
	—

Psychologist:

Test interviews	87
Parent interviews	39
Remedial Treatment interviews	72
School visits and reports	124
	—
	322
	—

Social Worker:

	<i>School Welfare</i>		<i>Clinic</i>
	<i>Cases</i>		<i>Cases</i>
Home visits	191	...	669
Clinic interviews	14	...	582

School inquiries	57	...	373
Consultation with other agencies	88	...	739
	<hr/> 350	...	<hr/> 2363

In addition to these activities in connection with families of both current and closed Child Guidance cases and the Welfare work, the Social Worker, Mrs. Barrett-Lennard, has given time to other aspects of social relationships. These include Merseyside Marriage Guidance Council meetings, talks to Young Wives' Groups, Youth Organisations and P.T.A. meetings, and attendance at professional meetings.

There has been no important change in the work of the Educational Clinic, which includes educational advice, individual remedial coaching, and classification for secondary schools. Miss Pilkington has continued to take remedial reading groups both at Church Street and in Barnston Lane School, the facilities for which have been kindly provided by the Head Teacher, Mr. Macklin.

Observations of Mrs. M. Avison, Speech Therapist:—

The terminology in The Speech Therapy Statistics requires explanation, and the following description of the terms may clarify the position.

The following terms are employed in the description of disorders of voice, articulation, language and speech. The conditions described may be developmental or acquired.

Aphonia and Dysphonia concern disorders of voice. The former implies absence of voice while Dysphonia is impairment of voice.

Defects of articulation are most frequent in children. Alalia infers absence of articulation and language and Dyslalia describes defects of articulation or slow development of articulatory patterns including substitutions, distortions, omissions and transpositions of the sounds of speech.

Dyseneia is an articulatory defect arising from defective hearing. Anarthria and Dysarthria both apply to disorders of articulation caused by neuro-muscular conditions, affecting muscle tone, and the action of the muscles used in articulation.

Sigmatism denotes defective articulation of “s” and “z”, while Rhotacism refers to a defective “r”.

The most common disorder of fluency is Stammering. This defect may be described as speech characterised by interruptions of its fluency by the repetition of sounds, syllables or phrases, and blocks, overt or disguised, often accompanied by concomitant movements and disruption of normal breathing rhythm. There may be avoidance reactions either of words or speech situations.

SPEECH THERAPY STATISTICS, 1960

Total number of attendances	1,723
Number of patients receiving regular treatment during the year	101
Number of patients receiving treatment at intervals during the year	121
Number of patients admitted	50
Number of patients discharged	59

Classification of Patients Admitted :

Dyslalia (defect of articulation)	26
Stammer	14
Interdental Sigmatism (defective articulation of “s” and “z”)	1
Lateral Sigmatism (defective articulation of “s” and “z”)	4
Rhotacism (defective articulation of “r”)	1
Cleft Palate	1
Dyseneia (articulatory defect caused by defective hearing)	3
	<hr/> 50 <hr/>

Classification of Patients Discharged :

Cured	39
Unco-operative	6
Left School	7
Left District	4
Attending School out of District	3
	<hr/> 59 <hr/>

Classification of Waiting List :

Not yet interviewed	15
Interviewed and placed on Supervision	35
Interviewed and awaiting regular appointment	20
	<hr/>
	70
	<hr/>

**MEDICAL EXAMINATION OF TEACHERS OR INTENDING
TEACHERS.**—Min. of Education Circ. 249 of 1952

Total Number Examined

Teachers		Intending Teachers	
Male	4	Male	12
Female	6	Female	48
	<hr/>		<hr/>
Total	10	Total	60
	<hr/>		<hr/>

IMMUNISATION**Diphtheria**

Schoolchildren given: Primary Immunisation	197
Reinforcing injections	1,200
	<hr/>
Total ...	1,397
	<hr/>

Poliomyelitis

Age Range: Born between 1945-1955—

Received Primary Immunisation	725
Received Reinforcing Injections	4,849
	<hr/>
Total ...	5,574
	<hr/>

Tuberculosis

Schoolchildren tested for suitability for vaccination (Mantoux test)	1,232
Schoolchildren Mantoux positive and <i>not</i> vaccinated	90
Schoolchildren Mantoux negative and suitable for vaccination	1,142
Schoolchildren vaccinated with B.C.G. vaccine	1,136

EXAMINATIONS OF CHILDREN FOR EMPLOYMENT, ENTERTAINMENT, HOLIDAYS ABROAD, ETC.

Employment	250
Entertainment	20
Holidays Abroad, etc.	46
	<hr/>
	316
	<hr/>

SUMMARY OF THE WORK CARRIED OUT BY THE SCHOOL HEALTH VISITORS DURING THE YEAR 1960

Health Surveys and Infestation with Vermin

Health Surveys	101
No. of Clinic Sessions re Cleansing	46
No. of Examinations	27,683
No. of individual children found unclean	509

Home Visits

Cleanliness	262
Medical Treatment	532
Hospital References	16
Miscellaneous	180
B.C.G.	1
Ineffective visits, i.e. No Access	66

Other

Visits to Nursery Class	14
Visits to Special Schools	6
Sessions for Medical Inspections	312
Sessions at Minor Ailment Clinics	542
Sessions at Ophthalmic Clinics	98
Sessions at Vision Testing of 8 year old pupils	47
Sessions on Weighing and Measuring (Medical Inspection)	78
Sessions spent on Surveys	262

TOTAL VISITS ... 1,299

TOTAL SESSIONS ... 1,502

ELLERAY PARK OPEN-AIR SCHOOL

During the year 18 children were admitted, the classification of their defects or diseases being as follows:—

General Debility	5
Spastic Paralysis	2
Bronchiectasis	1
Congenital Heart Lesion	2
T.B. Kidney	1
Chorea	1
Gauchers Disease	1
Club Feet	1
Rheumatic Heart	1
Osteomyelitis	1
Asthma	1
Epilepsy	1
	—
	18
	—

During the year 11 pupils were found suitable for transfer to ordinary schools, 4 left at 16 years of age, 1 was transferred to Derwen Cripples' Training College, Oswestry, Wales, 1 was admitted to a residential school for the physically handicapped, and 3 left for other reasons.

SCHOOL DENTAL SERVICE

Mr. Luya, Principal School Dental Officer, makes the following observations:—

The problems dealt with by those concerned with the care of children's teeth do not vary much year by year save in emphasis. but 1960 will be remembered as the year when, for the first time in six years, the full complement of four full-time officers became available. Of the four full-time dentists on the staff, one resigned in 1954, and as there is a shortage of dentists generally, and school dentists particularly, it was found impossible to fill the vacant post except by a series of dentists who were willing to work in the clinics part time only. This is not satisfactory as, however skilful and conscientious a dentist may be, if he eventually intends to leave the public service for private practice, his loyalty is divided: more than that, a new man requires time to learn the routine and techniques of the public service, and parents and children need time to become used to each new dentist, and every change is wasteful and a step backward. Therefore when, towards the end of the year, it was found possible to fill the vacant post, there was cause for rejoicing and hope that for a least a few years the staff

would remain stable. Of course, in six years a good deal of ground has been lost and time will be needed to make it up. Wallasey is lucky in one respect and, if the condition of the children's teeth is about average for the nation, the number of the dentists in the Borough (including school dentists) is above average, and treatment is available from one or the other at all times.

It has not been possible to make a complete circuit of inspection and treatment of schools during the year, but the fact that any child has not been inspected in school does not prevent it obtaining treatment at the clinics if parents wish. The dental clinics have been in operation for many years and are well known, and patients have no hesitation in making their own appointments. Children are referred for treatment after a school dental inspection, parents write, call or phone for appointments, school doctors and nurses send children, head teachers send children and older children make their own appointments. There is also a special register kept by each dentist of children whose parents wish them to be inspected at regular intervals; this interval may be yearly or six-monthly, depending on the condition of the mouth, and these children get the very best out of the School Dental Service; School Dentists, of course, welcome them with open arms and cannot get too many of this type of patient. There is still a difficulty in making parents understand that it is regular attention by a dentist which children need, and unless they get it, the time spent in putting a poor mouth in order can be entirely wasted. There are still far too many parents who allow children's teeth to decay until violent toothache forces them to the dentist, and only too often this leads to the necessity for an extraction of the more messy kind, an ordeal to which no child should be subjected. However, with a school population of 16,000, there is always some child somewhere in the Borough with toothache, and some consolation can be taken in the fact that a child with toothache is treated at once in practically every case.

Toothache, and the decay which leads to it, is to a large extent preventable, and a National Oral Hygiene campaign to try and educate parents was started by the British Dental Association at their Annual General Meeting in 1960. As part of the campaign in Wallasey, the Principal Dental Officer is taking every opportunity to speak in public on the subject. A series of short talks to children in school after morning assembly has been started, and Youth Clubs, Parent-Teacher Associations and other organisations are addressed when the opportunity presents. It must be admitted that there is a feeling of despair when the immense publicity campaigns are considered which devote hundreds of thousands of pounds to persuading children to keep their mouths permanently stuffed with decay-causing sweets: it is only necessary to study the T.V. screen, the cinema screen, public hoardings and the public press, to realise how powerful this pressure is. On the other hand, there are signs, slight but encouraging, that parents are at last beginning to take notice of the damage done by indiscriminate sweet eating; also, the prejudice against fillings is showing signs of growing less.

The distribution of the dental clinics in Wallasey is shortly to be altered. At present there is one surgery in Water Street, two in Thornville, Liscard Village, one in Merton Road, Liscard, and one in Oakenholt Road, Moreton. Thornville, an old house into which two surgeries were hurriedly transferred when the Church Street Clinic was destroyed by bombs in 1941 is to be demolished and a new clinic with a single surgery is to be opened on the Leasowe Estate. This will reduce the number of surgeries from five to four, but as there are only four dentists, one surgery has been used part time only and this will cause little difference; there will still be one surgery in Liscard, and a surgery has been needed for some time to serve the new housing estates in Leasowe. Thornville has the virtue of being in a central situation and a sunny position, otherwise, it is most unsuitable for a dental clinic and almost impossible to keep clean.

Consideration will have to be given shortly to replacing some of the dental equipment at all surgeries. Dental equipment wears out, becomes technically obsolete and new designs come into general use; some of the equipment is old and out of date, and parents are not encouraged to bring their children to dentists using shabby and out of date equipment. The evacuation of "Thornville" and the scrapping of one surgery will, it is hoped, give an opportunity for some refurnishing; the time has now come when at least one of the new high-speed turbine drills should be installed in at least one clinic.

On the whole, the year might be said to have ended on a note of restrained optimism, a new clinic in the offing, a full staff, more interest shown by parents, and the possibility of fluoridation of water in the future to help make teeth more resistant to decay.

PHYSICAL EDUCATION

Observations of Mr. Clare, Organiser of Physical Education:—

Mention has been made in previous reports of the trend of Physical Education to move away from remedial gymnastics and towards more recreational activities. Present circumstances dictate that corrective and remedial work is incidental only in the school Physical Education curriculum. The part of even the specialist teacher in such work is now limited to the fostering of cleanliness and hygiene, of normal mobility, strength and good posture, and to the detection of physical irregularities which can be referred to the School Medical Officer for proper diagnosis and treatment.

Concern during the year with regard to the incidence of foot infections has caused the banning of barefoot work and the borrowing of plimsolls. When the results of these measures can be assessed it may possibly be evident that risk of foot infection from these causes is less important than loss of foot and ankle mobility originating from the restrictions imposed.

Work in Physical Education has proceeded normally during the year. Modern ideas in methods of teaching and in content of the work are becoming more generally accepted. It will be realised

that all work in Primary Schools is carried out by non-specialist teachers, and that many such teachers would welcome a basic syllabus which they could follow and, so far as they may be able, improve upon.

Results of work in Physical Education are not readily assessable by the layman. They may perhaps be reflected in the organised sports events which take place. In athletics, 9 Wallasey children were selected for special coaching which was given at a residential course. The Wallasey team performed creditably in the County Championships and representatives competed at the National Meeting. As a Charter Year event the Primary Schools held a most successful Athletics Meeting for both girls and boys.

In Swimming the Wallasey team again won the County Championships. Interest was maintained and the standard of performance in Life Saving improved during the year. A course in the teaching of Swimming was held in April, and was attended by 38 Wallasey teachers. The provision of instructional pools on school premises would permit these teachers to do even more effective work and help enormously to achieve the aim of teaching every child to swim.

As reported last year the School Sports Associations are not all receiving the full and active support of all schools, though the provision of more facilities, particularly of playing fields adjacent to schools, is likely to ease the situation.

Publication of the Albemarle and Wolfenden Reports during the year has focussed public attention on the need for sports facilities for schoolchildren and young people, and their recommendations are welcomed.

In Wallasey, some improvement in facilities can be reported, especially the playing fields constructed during 1960 at Lingham Primary and Clare Mount E.S.N. Schools, which will be ready for use in 1961. Tennis courts have now been provided at the Technical Grammar School, and work will shortly be commenced on playing fields and tennis courts for the Moreton Secondary Schools. It is a matter for regret that construction of school playing fields should not have kept pace with the erection of new school buildings. Apart from the intrinsic value of such fields they help appreciably to relieve pressure on indoor space, and it is hoped that playing fields for future new schools will be ready for use by the date the schools are opened.

SCHOOL MEALS SERVICE, 1960

Observations of Miss A. Collins, Organiser of School Meals:

The meals census taken on a day in October, 1960, showed that 6,674 children had school meals on that day, an increase of 534 on the previous year. 826 of these meals were provided free of charge to necessitous children.

During the school holidays meals supplied from a central kitchen continued to be served at seven centres in the Borough.

As a result of the continuing expansion and adaptation of the Wallasey Technical College buildings, it became necessary in July to close the Withens Lane Central Kitchen. A number of other kitchens in the Borough with surplus capacity took over the preparation of meals which had up to that time been the responsibility of the Withens Lane Kitchen and the kitchen staff were absorbed in other kitchens.

Improvements in equipment are continuously being made at the older kitchens, including the replacement of hot cupboards, boiling pans and sink units in stainless steel. The covering of preparation tables with a laminated plastic is a greatly improved surface from the hygiene aspect.

As part of the general replacement of benches and folding tables which have been in use for so many years, the dining room at Wallasey Grammar School has been re-furnished with chairs and wooden refectory tables.

MEDICAL INSPECTION, 1960

MAINTAINED PRIMARY AND SECONDARY SCHOOLS

PART I—MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED AND ASSISTED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

TABLE A.—PERIODIC MEDICAL INSPECTIONS

Number of pupils on registers 16,271

Age Groups Inspected (By year of birth)	No. of Pupils Inspected	Physical Condition of Pupils Inspected			
		Satisfactory		Unsatisfactory	
		No.	% of Col. 2	No.	% of Col. 2
		(3)	(4)	(5)	(6)
1956 and later	30	30	100	—	—
1955	415	415	100	—	—
1954	1,180	1,175	99.58	5	.42
1953	116	114	98.3	2	1.7
1952	37	37	100	—	—
1951	18	17	94.4	1	5.6
1950	31	29	93.55	2	6.45
1949	456	454	99.6	2	.4
1948	770	768	99.7	2	.3
1947	312	312	100	—	—
1946	499	494	99	5	1.00
1945 and earlier	748	741	99.07	7	.93
TOTAL	4,612	4,586	99.44	26	.56

TABLE B.—PUPILS FOUND TO REQUIRE TREATMENT AT PERIODIC MEDICAL INSPECTIONS
(excluding Dental Diseases and Infestation with Vermin)

Age Groups Inspected (By year of birth) (1)	For defective vision (excluding squint) (2)	For any of the other conditions recorded in Part II (3)	Total individual pupils (4)
1956 and later	1	19	14
1955	25	124	112
1954	79	451	421
1953	9	46	39
1952	4	18	15
1951	—	8	6
1950	4	10	11
1949	71	158	179
1948	124	210	280
1947	55	89	118
1946	93	110	175
1945 and earlier	173	183	284
TOTAL	638	1,426	1,654

TABLE C.—OTHER INSPECTIONS

Number of Special Inspections	1,616
Number of Re-inspections	358
Total	1,974

TABLE D.—INFESTATION WITH VERMIN

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons ..	27,683
(b) Total number of individual pupils found to be infested ..	509
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944)	—
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944)	—

PART II—DEFECTS FOUND BY MEDICAL INSPECTION DURING THE YEAR

PART II TABLE A.—PERIODIC INSPECTIONS

Defect or Disease (2)	PERIODIC INSPECTIONS							
	Entrants		Leavers		Others		Total	
	(T) (3)	(O) (4)	(T) (5)	(O) (6)	(T) (7)	(O) (8)	(T) (9)	(O) (10)
Skin	59	13	66	48	74	23	199	84
Eyes—(a) Vision	111	102	260	11	267	57	638	170
(b) Squint	38	6	14	4	43	8	95	18
(c) Other	9	6	12	7	17	5	38	18
Ears—(a) Hearing	19	33	3	3	16	28	38	64
(b) Otitis Media	5	24	3	—	14	5	22	29
(c) Other	24	6	19	5	34	11	77	22
Nose and Throat	150	103	13	48	40	115	203	266
Speech	37	13	1	3	16	9	54	25
Lymphatic Glands	5	34	—	7	—	24	5	65
Heart	5	13	1	19	10	32	16	64
Lungs	41	25	14	14	27	35	82	74
Developmental—								
(a) Hernia	9	4	1	1	2	7	12	12
(b) Other	34	49	16	29	27	73	77	151
Orthopaedic—								
(a) Posture	1	5	10	21	16	42	27	68
(b) Feet	64	23	41	23	60	33	165	79
(c) Other	24	17	40	37	52	51	116	105
Nervous System—								
(a) Epilepsy	1	5	2	2	5	5	8	12
(b) Other	5	6	4	7	21	19	30	32
Psychological—								
(a) Development	50	4	3	1	20	24	73	29
(b) Stability	27	15	7	10	17	25	51	50
Abdomen	22	2	1	1	3	4	26	7
Other	6	1	—	1	6	—	12	2

PART II TABLE B.—SPECIAL INSPECTIONS

Defect or Disease (2)	SPECIAL INSPECTIONS	
	Pupils requiring Treatment (3)	Pupils requiring Observation (4)
Skin	73 + (456)★	12
Eyes—(a) Vision	33	6
(b) Squint	10	1
(c) Other	53	5
Ears—(a) Hearing	22	4
(b) Otitis Media	6	—
(c) Other	79	6
Nose and Throat	27	4
Speech	14	1
Lymphatic Glands	—	—
Heart	2	—
Lungs	32	13
Developmental—		
(a) Hernia	—	—
(b) Other	9	4
Orthopaedic—		
(a) Posture	1	1
(b) Feet	69	4
(c) Other	26	10
Nervous System—		
(a) Epilepsy	2	2
(b) Other	14	3
Psychological—		
(a) Development	4	—
(b) Stability	13	2
Abdomen	7	1
Other	418	61

*No. of pupils found to require treatment for Warts or Veruccae.

**TREATMENT OF PUPILS ATTENDING MAINTAINED
AND ASSISTED PRIMARY AND SECONDARY SCHOOLS
(INCLUDING NURSERY AND SPECIAL SCHOOLS)**

**PART III TABLE A.—EYE DISEASES, AND DEFECTIVE VISION
AND SQUINT**

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	163
Errors of refraction (including squint)	1,289
Total	1,452
Number of pupils for whom spectacles were prescribed	832

TABLE B.—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases known to have been dealt with
Received operative treatment—	
(a) for diseases of the ear	—
(b) for adenoids and chronic tonsillitis	251
(c) for other nose and throat conditions	2
Received other forms of treatment	114
Total	<u>367</u>
Total number of pupils in schools who are known to have been provided with hearing aids—	
(a) in 1960	3
(b) in previous years	7

TABLE C.—ORTHOPAEDIC AND POSTURAL DEFECTS

	Number of cases known to have been treated
(a) Pupils treated at clinics or out-patient departments	1,402
(b) Pupils treated at school for postural defects	22
Total	<u>1,424</u>

TABLE D.—DISEASES OF THE SKIN

(excluding uncleanness, for which see Table D of Part 1)

	Number of cases known to have been treated
Ringworm—(a) Scalp	—
(b) Body	—
Scabies	1
Impetigo	45
Other skin diseases	130
Total	<u>176</u>

TABLE E.—CHILD GUIDANCE TREATMENT

	Number of cases known to have been treated
Pupils treated at Child Guidance Clinics	71

TABLE F. — SPEECH THERAPY

	Number of cases known to have been treated
Received regular treatment	101
Received treatment at irregular intervals	121
Total pupils treated by Speech Therapist	<u>222</u>

TABLE G. — OTHER TREATMENT GIVEN

	Number of cases known to have been dealt with
(a) Pupils with minor ailments	1,522
(b) Pupils who received convalescent treatment under School Health Service arrangements	4
(c) Pupils who received B.C.G. vaccination ...	1,136
(d) Other than (a), (b) and (c) above: —	
Treatment given for warts	223
“ “ “ veruccae	174
Hospital In-patient treatment—Medical	145
“ “ “ —Surgical	89
“ “ “ —Orthopaedic	34
Total (a)—(d)	<u>3,327</u>

PART IV.—DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY

(1) Number of pupils inspected by the Authority's Dental Officers:—	
(a) At Periodic Inspections	6,285
(b) As Specials	1,950
Total (1)	<u>8,235</u>
(2) Number found to require treatment	5,478
(3) Number offered treatment	5,019
(4) Number actually treated	3,760
(5) Number of attendances made by pupils for treatment, including those recorded at 11(h)	8,090
(6) Half days devoted to—	
(a) Periodic (School) Inspection	75
(b) Treatment	1,616
Total (6)	<u>1,691</u>
(7) Fillings: (a) Permanent Teeth	3,235
(b) Temporary Teeth	58
Total (7)	<u>3,293</u>

(8) Number of Teeth Filled:		(a) Permanent Teeth	2,979
		(b) Temporary Teeth	57
		Total (8)	3,036
(9) Extractions:		(a) Permanent Teeth	1,234
		(b) Temporary Teeth	2,000
		Total (9)	3,234
(10) Administration of general anaesthetics for extraction			2,013
(11) Orthodontics:			
		(a) Cases commenced during the year	9
		(b) Cases carried forward from previous year	3
		(c) Cases completed during the year	3
		(d) Cases discontinued during the year	3
		(e) Pupils treated with appliances	32
		(f) Removable appliances fitted	10
		(g) Fixed appliances fitted	4
		(h) Total attendances	79
(12) Number of pupils supplied with artificial teeth			12
(13) Other operations:		(a) Permanent Teeth	1,616
		(b) Temporary teeth	2
		Total (13)	1,618

MINOR AILMENTS AND OTHER CLINICS

Monday	(a.m.)	School Clinic, Merton Road, Wallasey	Minor Ailments
		Child Welfare Centre, Oakenholt Rd., Moreton	Minor Ailments
		Child Welfare Centre, Water Street, Wallasey ..	Minor Ailments and S.M.O.'s Clinic
	(p.m.)	—	—
Tuesday	(a.m.)	School Clinic, Merton Road, Wallasey	S.M.O.'s Clinic and Minor Ailments
		Child Welfare Centre, Oakenholt Rd., Moreton	Minor Ailments and S.M.O.'s Clinic
		Child Welfare Centre, Water Street, Wallasey ..	—
	(p.m.)	School Clinic, Merton Road, Wallasey	—
		Other Clinics	—

Wednesday	(a.m.)	School Clinic, Merton Road, Wallasey Child Welfare Centre, Moreton Child Welfare Centre, Water Street, Wallasey ..	Ophthalmic Clinic (Dr. Edwards) (Fortnightly) Minor Ailments Ophthalmic Clinic (Dr. Edwards) (Fortnightly) Minor Ailments
	(p.m.)	School Clinic, Merton Road, Wallasey Child Welfare Centre, Moreton Child Welfare Centre, Water Street, Wallasey ..	Immunisation (1st and 3rd Wednesday of each month) — —
Thursday	(a.m.)	School Clinic, Merton Road, Wallasey Child Welfare Centre, Moreton Child Welfare Centre, Water Street, Wallasey ..	Minor Ailments Minor Ailments —
	(p.m.)	School Clinic, Merton Road, Wallasey Child Welfare Centre, Moreton Child Welfare Centre, Water Street, Wallasey ..	Orthopaedic Specialist's Clinic (Mr. Davies), (Except every 4th Thursday) do. (every 4th Thursday) —
Friday	(a.m.)	School Clinic, Merton Road, Wallasey Child Welfare Centre, Moreton Child Welfare Centre, Water Street, Wallasey ..	Ophthalmic Clinic (Dr. Edwards) Minor Ailments Minor Ailments
	(p.m.)	School Clinic, Merton Road, Wallasey Child Welfare Centre, Moreton Child Welfare Centre, Water Street, Wallasey ..	S.M.O.'s Clinic (as required) Immunisation (Fortnightly) —
Saturday	(a.m.)	—	—

SPEECH THERAPY CLINICS

Monday	(a.m.)	Vaughan Road J. M. School, Wallasey
	(p.m.)	Clare Mount School, Wallasey
Tuesday	(a.m.)	School Clinic, Merton Road, Wallasey
	(p.m.)	School Clinic, Merton Road, Wallasey
Wednesday	(a.m.)	Child Welfare Centre, Water Street, Wallasey
	(p.m.)	Elleray Park School, Wallasey
Thursday	(a.m.)	School Clinic, Merton Road, Wallasey
	(p.m.)	School or Home visits
Friday	(a.m.)	Child Welfare Centre, Water Street, Wallasey
	(p.m.)	Child Welfare Centre, Oakenholt Road, Moreton

PHYSIOTHERAPY CLINICS

Monday	(a.m.)	School Clinic, Merton Road, Wallasey (U.V.L. and R.E. and Individual Treatments) Child Welfare Centre, Oakenholt Road, Moreton (Remedial Exercises)
	(p.m.)	Elleray Park Special School, Elleray Park Road, Wallasey (Individual Treatments) Child Welfare Centre, Oakenholt Road, Moreton. (Remedial Exercises)
Tuesday	(a.m.)	Elleray Park Special School, Elleray Park Road, Wallasey (Remedial Exercises) Congregational Church Hall, Princess Road, Wallasey (Individual and Group Treatments)
	(p.m.)	School Clinic, Merton Road, Wallasey (Remedial Exercises) Child Welfare Centre, Oakenholt Road, Moreton. (U.V.L. and Remedial Exercises)
Wednesday	(a.m.)	School Clinic, Merton Rd., Wallasey (U.V.L. and Individual Treatments) Elleray Park Special School, Elleray Park Road, Wallasey (Individual Treatments)
	(p.m.)	Child Welfare Centre, Water Street, Wallasey (Remedial Exercises) School Clinic, Merton Rd., Wallasey (Individual Treatments)

Thursday	(a.m.)	Elleray Park Special School, Wallasey (Remedial Exercises) Child Welfare Centre, Oakenholt Road, Moreton (U.V.L. & Individual Treatments)
	(p.m.)	School Clinic, Merton Road, Wallasey (Orthopaedic Specialist's Clinic) Child Welfare Centre, Oakenholt Road, Moreton (Orthopaedic Specialist's Clinic once per month)
Friday	(a.m.)	Elleray Park Special School, Elleray Park Road, Wallasey (Remedial Exercises) School Clinic, Merton Rd., Wallasey (U.V.L. and Individual Treatments)
	(p.m.)	Grosvenor Assembly Rooms, Grosvenor St., Wallasey (Remedial Exercises) School Clinic, Merton Road, Wallasey (Individual Treatments)

SCHOOL DENTAL CLINICS

Monday	(a.m.)	School Dental Clinic, 47 Liscard Village, Wallasey Child Welfare Centre, Oakenholt Rd., Moreton School Clinic, Merton Road, Wallasey
	(p.m.)	School Dental Clinic, 47 Liscard Village, Wallasey School Clinic, Merton Road, Wallasey Child Welfare Centre, Moreton
Tuesday	(a.m.)	Child Welfare Centre, Moreton School Clinic, Merton Road, Wallasey Child Welfare Clinic, Water Street, Wallasey
	(p.m.)	Child Welfare Centre, Moreton School Clinic, Merton Road, Wallasey Child Welfare Clinic, Wallasey.
Wednesday	(a.m.)	School Dental Clinic, 47 Liscard Village, Wallasey School Clinic, Merton Road, Wallasey Child Welfare Centre, Oakenholt Rd., Moreton Child Welfare Clinic, Wallasey
	(p.m.)	School Dental Clinic, 47 Liscard Village, Wallasey School Clinic, Merton Road, Wallasey Child Welfare Centre, Oakenholt Rd., Moreton Child Welfare Clinic, Wallasey
Thursday	(a.m.)	School Dental Clinic, 47 Liscard Village, Wallasey Child Welfare Centre, Oakenholt Rd., Moreton Child Welfare Clinic, Wallasey
	(p.m.)	School Dental Clinic, 47 Liscard Village, Wallasey School Clinic, Merton Road, Wallasey Child Welfare Centre, Oakenholt Rd., Moreton Child Welfare Clinic, Wallasey
Friday	(a.m.)	School Clinic, Merton Road, Wallasey Child Welfare Clinic, Water Street, Wallasey School Dental Clinic, 47 Liscard Village, Wallasey
	(p.m.)	School Dental Clinic, 47 Liscard Village, Wallasey School Clinic, Merton Road, Wallasey Child Welfare Clinic, Water Street, Wallasey
Saturday	(a.m.)	Child Welfare Clinic, Wallasey

CHILD GUIDANCE CLINIC

(Psychiatric Department)

120, Church Street, Wallasey, Dr. G. Egan, M.D., Ch.B., D.P.M.,
Tuesday afternoons and Thursday afternoons

(G)		Year Ended 31st December, 1960		
		No. of children reported to the Local Health Authority—		
(i)	(a) Under Sec. 57 (3) (prior to 1/11/60) or Under Sec. 57 (4) (from 1/11/60)	...	...	7
	(b) Under Sec. 57 (5) (prior to 1/11/60)	...	...	2
(ii)	No. of cancelled decisions (child unsuitable for school), cancelled under Sec. 57A (2)	...	...	None

